L07000114292

((Requestor's Name)	<u> </u>
	(Address)	
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	(City/State/Zip/Phone #)	
. PICK-UP	wait	MAIL
	(Dusiness Entity Name)	
•	(Business Entity Name)	1
• ((Document Number)	; ;
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Certified Copies	Certificates of S	Status
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EXAMINER

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Kealty Buyer Good LUC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Troube forum air correspondence concerning and matter te-	
Seggio De Cessari (Contact Person)	٠
Realty Buses Grouple (Firm/Company)	2805 SEP
27499 Rivervew Ctr #210	23 M 6:
Borital Springs FC 34134 (City/State and Zip Code)	OF TO

For further information concerning this matter, please call:

Se	Daio	DeCesare	at 39	220-5106
(Name o	of Contact Person)	(Area Coo	le & Daytime Telephone Number)
Enclose	d please f	ind a check made payable	to the Florida	Department of State for:

\$25 Filing Fee \$25 Filing Fee Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as it a alty Buyers Group, LLC	ppears on the records	s of the Flor	ida Dep	artment			
2. This limited liability company was organized under the laws of: Florida				MELKN	2009 SEP			
3. The Florida document/registration number of this limited liability company is: L07000114292		npany is:	ASSELFLO	SEP 23 AM 10: 40				
4. I, Jerry Lee Overmyer, PA (Print Name of Person Resigning)		_, hereby resign as a	MGRM (Prin	u Title)	<u>*</u>			
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.								
Signarpre of Resi	gning Member, Managing Mcm	ber or Manager						
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)							