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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Sonne Realty LLC (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: |
| IRIS BURGMAN (Contact Person) |
| |
| IRIS BURGMAN - Sole PROPRIETUR |
| |
| 12036 S.E. 178 STREET (Address) |
| Summerfield Florida 34491 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| TRIS BURG-MAN at (352) 406-3239 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the Florida Department of State for: \$\sum_{\text{\$\subset\$}}\$ |
| Certified Copy |
| STREET/COURIER ADDRESS: MAILING ADDRESS: |
| Registration Section Registration Section |
| Division of Corporations Clifton Building Division of Corporations P.O. Box 6327 |
| 2661 Executive Center Circle Tallahassee, Florida 32314 |

CR2E079 (5/06)

Tallahassee, Florida 32301



FILED

2010 JAN 12 PM 12: 58

SECRETARY OF STATE TALLAHASSEE. FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| | | pears on the records of the Florida Department |
|-------------------------------|---|--|
| of State is: | Sonne Real | y, LLC |
| | ility company was organized undo | |
| | ment/registration number of this 7 006 11 5 6 7 8 | The state of the s |
| 4.1, <u>IR 15</u> (Print N | BURGMAN Jame of Person Resigning) | , hereby resign as a MAN AGING Member (Print Title) |
| | bility company and affirm the lim | ited liability company has been notified of my |
| | es Buyras - | |
| Signature of Resi | igning Member, Managing Memb | er or Manager |
| | \$25.00 (Required) | |
| Certified Copy: | \$30.00 (Optional) | |