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SECRETARY OF STATE

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T. HAMPTON
SEP X 0 2011
EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: FIRST Commonwealth REAL (Name of Limited Liability)	4L Estate and Business Brakeruge, L.L.C. lity Company)
The enclosed member, managing member or manage filing.	r resignation and fee(s) are submitted for
Please return all correspondence concerning this matt	ter to:
Denise BURKE (Contact Person)	
(Firm/Company)	<u>·</u>
830 N. Aslantic AVE - B1404	
Cocoa Beach FL 32931 (City/State and Zip Code)	
For further information concerning this matter, please	e call:
Denise Burke at (3 (Area (Area))	2/) 868-1774 a Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo \$25 Filing Fee	state for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301

TO: Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		it appears on the records of the Florida Department Reac Estate and Business Brokeruge, L
2. This limited I	iability company was organized	under the laws of:
_	ocument/registration number of	this limited liability company is:
4. I, <u>Denise</u>	BURKE nt Name of Person Resigning)	, hereby resign as a <u>MANAGING Member</u> (Print Title)
of this limited resignation in	· · ·	limited liability company has been notified of my
Signature of R	esigning Member, Managing Me	ember or Manager
Filing Fee:	\$25.00 (Required)	

CR2E079 (5/06)

Certified Copy:

\$30.00 (Optional)

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