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SECRETARY OF STATE
FALLAHASSEE. FLORIO

J. BRYAN

APR 1 4 2011

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: UNITED BUILDERS LLC	
(Name of Limited Liability Co	ompany)
The enclosed member, managing member or manager resifiling.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to	:
OLIVER PFEFFER	
(Contact Person)	_
UNITED BUILDERS LLC	
(Firm/Company)	PR PR
1666 KENNEDY CAUSEWAY SUITE 210	HAPRIS MII: 4. SECRETARY OF STATE FALLAHASSEE, FLORIC
(Address)	7.0
NORTH BAY VILLAGE, FL 33141 (City/State and Zip Code)	OR ID
(Chyrotate and Zip Code)	
For further information concerning this matter, please call	:
OLIVER PFEFFER at ( 305	459-1180
(Name of Contact Person) (Area Code	e & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida  \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it a	appears on the records of the	Florida Department
2. This limited liabili FLORIDA	ty company was organized un	der the laws of:	TILLE
3. The Florida docum	nent/registration number of thi	is limited liability company i	STATE STATE STATE STATE
4. I, DAVID REIC	H ne of Person Resigning)	_, hereby resign as a MEM	IBER (Print Title)
of this limited liabil resignation in writing	ity company and affirm the ling.	mying Mente	been notified of my
Signature of Resign Filing Fee: Certified Copy:	ning Member, Managing Mem \$25.00 (Required) \$30.00 (Optional)	iber&r M <b>4</b> nager	