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| PICK-UP WAIT MAIL | | | | | |
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| (Business Entity Name) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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Special Instructions to Filing Officer:

L. SELLERS

JUL -7 2011

EXAMINER

Office Use Only



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SEGRETARY OF STATE ALLAHASSEF, FLORIDA

COVER LETTER

CR2E079 (5/06)

| TO: | Registration Section Division of Corporations | |
|---------------|---|--|
| SUBJ | ECT: 1ST USA REAL ESTATE | E LLC |
| | (Name of Limited | d Liability Company) |
| The enfiling. | nclosed member, managing member or ma | nanager resignation and fee(s) are submitted for |
| Please | return all correspondence concerning thi | is matter to: |
| RON | IALD B. FINN | |
| | (Contact Person) | |
| ATT | ORNEY AT LAW | |
| | (Firm/Company) | |
| 1676 | SE LAKE LEGACY WAY | |
| | (Address) | |
| STU | ART, FL 34997 | |
| | (City/State and Zip Code) | |
| For fu | rther information concerning this matter, | please call: |
| RON | IALD B. FINN | nt (772) 220-4436 |
| | (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclos | ed please find a check made payable to the | the Florida Department of State for: |
| | \$25 Filing Fee | |
| | | Certified Copy |
| STRE | ET/COURIER ADDRESS: | MAILING ADDRESS: |
| _ | ration Section | Registration Section |
| | on of Corporations | Division of Corporations |
| | n Building | P.O. Box 6327 |
| | Executive Center Circle | Tallahassee, Florida 32314 |
| Tallaha | assee, Florida 32301 | |



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 | • • | of the Florida Department | |
|--------------------------------|--|------------------------------|---------------------------|---|
| 2. This limited liab | ility company was organized | l under the laws of: | | |
| _ | ument/registration number of | f this limited liability com | pany is: | |
| 4. I, RONALD B. FINN | | herehy resion as a | MANAGING MEMBER | ? |
| | lame of Person Resigning) | nordely reerigin as a _ | (Print Title) | |
| resignation in wr | bility company and affirm th iting. igning Member, Managing M | | y has been notified of my | |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | MELAHASAS | |