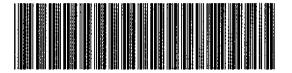
_LD800009818Z

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
•				
FEB 01 2012				
L SELLERS				

Office Use Only



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TILELI 12 JAN 31 PH 5: IN SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: M: Ke Tudor (Name of Limit	Estate Sales, LLC ed Liability Company)			
	manager resignation and fee(s) are submitted for			
Please return all correspondence concerning th	nis matter to:			
Michael H. Tudor (Contact Person)	<u>. </u>			
Mike Tador Estate (Firm/Company)	Sales, CCC			
1714 Westchester (Address)	avenue			
Winter Park Flori (City/State and Zip Code)	da 32789			
For further information concerning this matter	, please call:			
Mike Tudor (Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to \$\sqrt{25}\$ Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section Registration Section				
ivision of Corporations Division of Corporations P.O. Box 6327				
2661 Executive Center Circle	Tallahassee, Florida 32314			

CR2E079 (5/06)

Tallahassee, 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 it			
,	ility company was organized to			
	ument/registration number of t	his limited liability	company is:	
	L. Hensley Same of Person Resigning) bility company and affirm the liting.			
Signature of Resi	gning Member, Managing Me	mber or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		IACL	12 SEC