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Special Instruction	s to Filing Officer:					
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SECRETARY OF STATE
SECRET

J. BRYAN

MAR 27 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Shorewest Realty, LLC (Name of Limited	Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Shawn Matthews	
(Contact Person)	75° 39
Shorewest Realty, LLC	LA L
(Firm/Company)	Syn
200 Forest Lake Blvd Ste 1	HASSEE, FLORIT
(Address) Daytona Beach, FL 32119	ORIO A
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
Shawn Matthews	, 386 295–1896
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the xx \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



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

1. The nan	ne of the li	mited liability company as it	appears on the records	of the Florida Department
of State	e is:	Shorewest Realty, LLC		<u> </u>
	nited liabili Florida	ty company was organized ur	nder the laws of: 	
		nent/registration number of th		pany is:
4. I,	Gale Mat	thews	, hereby resign as a	Manager Member
(Print Name of Person Resigning)				(Print Title)
	mited liabii on in writi	lity company and affirm the ling.	mited liability compar	ny has been notified of my
	ale 1	1 ptt reus	<u></u>	
Signatur	e of Resign	ning/Member, Managing Mer	nber or Manager	
		\$25.00 (Required)		
Certified (Copy:	\$30.00 (Optional)		