209000037063

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
A. LUNT
MAY - 9 2010
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TALLAHASSEE, FLORIER

CR2E079 (5/06)

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 307 EAST, LLC	
(Name of Limit	ed Liability Company)
The enclosed member, managing member or rilling.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning the	nis matter to:
CINDY SPALLONE	
(Contact Person)	
307 EAST, LLC	nis matter to:
(Firm/Company)	
307 EAST ATLANTIC AVENUE	
(Address)	
DELRAY BEACH, FL 33483	
(City/State and Zip Code)	
For further information concerning this matter	please call:
CINDY SPALLONE	at (\$61) 865-7341
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	the Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
Linu C	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



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

2011 MAY -5 PM 3: 00

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

	Timited liability company as D7 EAST ATLANTIC,	LLC
2. This limited liab	oility company was organized	l under the laws of:
3. The Florida doc L0900003	_	this limited liability company is:
4. I, CINDY SF	PALLONE	, hereby resign as a MANAGING MEMBER
(Print A	iame of Person Resigning)	(Print Title)
		e limited liability company has been notified of my
resignation in wr	iting.	
Signature of Bes	ign)ng Member, Managing M	lember or Manager
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	