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EXAMINER



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1VISION OF CORPORATION 12 37

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Kayla 924 LLC	
(Name of Limited	Liability Company)
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning thi	s matter to:
Lisa Magill, Esq.	
(Contact Person)	
Becker & Poliakoff, P.A.	
(Firm/Company)	
3111 Stirling Road	
(Address)	
Fort Lauderdale, FL 33312	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Lisa Magill at	954 965-5053
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	ne Florida Department of State for:
\$25 Filing Fee	\$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

The name of the limited liability company as it of State is: Kayla 924 LLC	t appears on the records of the Florida Department
2. This limited liability company was organized to Florida	under the laws of:
3. The Florida document/registration number of to Document Number L0900009563	
4. I, Lisa Magill (Print Name of Person Resigning)	, hereby resign as a Manager (Print Title)
	SECRETARY OF OUR SECRETARY O