L09000109281

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SECRETARY OF STATE

J. BRYAN

FEB - 3 2009

EXAMINER

COVER LETTER

TO: Registration Section

SUBJECT: EAST WEST ASSET MANAGEMENT, (Name of Limited Liability Company)	
(Name of Emmed Elaomy Company)	
The enclosed member, managing member or manager resignation a filing.	and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
ZVI RAFILOVICH, CPA	
(Contact Person)	Bu =
ZVI RAFILOVICH, CPA, P.A.	ECRE
(Firm/Company)	ASS -2
2229 SHERIDAN STREET	E P
(Address)	E STATE OF THE STA
HOLLYWOOD, FLORIDA 33020	ID TE
(City/State and Zip Code)	
For further information concerning this matter, please call:	
ZVI RAFILOVICH, CPA at 954 921	-0588
(Name of Contact Person) (Area Code & Dayti	ime Telephone Number)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it a			da Depart	tment	
of State is: EAST WEST ASSET MAN	AGEMENT, LLO	<u> </u>	***		
2. This limited liability company was organized und FLORIDA	der the laws of: 		SECRETARY OF	10 EEB - 2 P	TI F
3. The Florida document/registration number of this L09000109281	s limited liability con 	npany is:	FSTATE	1:37	O
4. I. N.A. REAL INVESTMENTS LLC	_, hereby resign as a	MANAG	ING MI	EME	BER
(Print Name of Person Resigning)	<u></u>	(Print	Title)		
of this limited liability company and affirm the line resignation in writing.	nited liability compa	ny has been	notified o	f my	
Signature of Resigning Member, Managing Mem	ber or Manager				,