## L10000017556

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
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(Bu	siness Entity Nar	me)
(Do	cument Number)	<u></u>
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19 2011

EXAMNER

## **COVER LETTER**

Tallahassee, Florida 32301

CR2E079 (5/06)

<b>TO:</b> Registration Section Division of Corporations	
SUBJECT: South Florida Equities (Name of Limited I	LLC Liability Company)
The enclosed member, managing member or marfiling.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Scott A. Turner	
South Florida Equities LLC (Firm/Company)	
200 Fox Den Cir.	Ā'.
(Address)	TLANGE C
Naples, Florida 34104	UL 18 HASSE
(City/State and Zip Code)	<u> </u>
For further information concerning this matter, p	lease call:
Scott A. Turner	239 253-3448
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$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 Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314



## 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 uth Florida Equities		cords of the F	lorida De	eparti	ment 
2. This limited liab	oility company was organized	under the laws of:		ALLAHASSE	11 JUL 18	
3. The Florida doc L100000	ument/registration number of 17556	this limited liability	company is:	OF STATE E. FLORIDA	門位制	
4.1, Arne Las	Sen  ame of Person Resigning)	, hereby resign	as a Mem	ber Print Title)	)	
	bility company and affirm the	e limited liability co	mpany has be	een notif	ied o	f my
fler	und on		"AS OF	DEC.	20	olo"
Signature of Res	igning Member, Managing M	ember or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					