40000028465

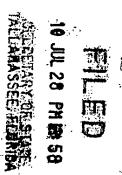
(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



600183644266

07/28/10--01006--006 **50.00



D. BRUCE
JUL 29 2010
EXAMINED

COVER LETTER

_	ion Section of Corporations		
SUBJECT: NY	/FL Commercial Hold	dings 2, LLC	
The enclosed me filing.	•	manager resignation and fee(s) are submitted for	
Please return all	correspondence concerning t	his matter to:	
Joan C. Hen	ıry, Esquire		
	(Contact Person)		st.
Lusk, Drasite	es, Tolisano & Smith,	P.A. 28	
	(Firm/Company)	We 3	•
202 Del Prad	do Boulevard		
	(Address)	0	
Cape Coral,	FL 33990		
	(City/State and Zip Code)		
For further inform	mation concerning this matte	er, please call:	
Joan C. Hen	ory, Esquire	at (239) 574-7442 (Area Code & Daytime Telephone Number)	
·	·	o the Florida Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COUR Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, Flor	oorations Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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

	limited liability company as FL Commercial Holdi	it appears on the records of the F	Torida Departm	ient
2. This limited liab Florida	ility company was organized	under the laws of:	10 JUL 28	
3. The Florida docu L10000028	_	this limited liability company is	PH STATE	
4. I, Tom Vene	tis ame of Person Resigning)	, hereby resign as a MGR	(Print Title)	_
of this limited lial resignation in wr	oility company and affirm the	e limited liability company has b	•	my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			