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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				

Special Instructions to Filing Officer:

L. SELLERS

JUL 28 2010

EXAMINER

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

CR2E079 (5/06)

TO:	Registration Section		
	Division of Corporations		
SUBJ	TECT: The Safari Real Estate Gre	oup, LLC	
		imited Liability Co	mpany)
The e	nclosed member, managing member	or manager resig	enation and fee(s) are submitted for
filing.			Burnoni mira 100(p) ma prasilinara 101
Please	e return all correspondence concerni	ng this matter to	· · · · · · · · · · · · · · · · · · ·
Elizal	beth Shuey		
	(Contact Person)		
The S	Safari Real Estate Group, LLC		,
	(Firm/Company)		- - -
885 N	lature's Cove Road		
	(Address)	· · · · · · · · · · · · · · · · · · ·	
Dania	a, Florida 33004	•	
	(City/State and Zip Code)	· · · · · ·	
п с			
ror iu	urther information concerning this ma	atter, please call	;
Elizat	peth Shuey	at (954) 496-0626 è & Daytime Telephone Number)
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclo	sed please find a check made payabl	e to the Florida	Department of State for:
	\$25 Filing Fee		\$55 Filing Fee &
		 	Certified Copy
	EET/COURIER ADDRESS:		MAILING ADDRESS:
_	tration Section		Registration Section
	ion of Corporations		Division of Corporations
	n Building		P.O. Box 6327
2661	Executive Center Circle		Tallahassee, Florida 32314
Tallal	nassee, Florida 32301		



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 appears on the records of the Florida Dep			
of State is: The Safari Real Estate Group, L	LC		
2. This limited liability company was organized u	nder the laws of:		
Florida	,		
3. The Florida document/registration number of the	nis limited liability company is:		
L10000067144			
	 ,		
4. I, Michael Lease	, hereby resign as a Managing Member		
(Print Name of Person Resigning)	(Print Title)		
of this limited liability company and affirm the l resignation in writing.	imited liability company has been notified of my		
- Mis Lew			
Signature of Resigning Member, Managing Me	mber or Manager		
-			

Filing Fee:

\$25.00 (Required)

Certified Copy:

\$30.00 (Optional)

CCRETARY OF STATE