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#### **COVER LETTER**

TO: Registration Section
Division of Corporations

### SUBJECT: RESIDENCES AT THE FALLS INVESTMENT LLC (Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: JORGE E. OTERO, ESQ. (Contact Person) OTERO & ASSOCIATES, P.A. (Firm/Company) 75 VALENCIA AVENUE (Address) CORAL GABLES, FLORIDA 33134 (City/State and Zip Code) For further information concerning this matter, please call: at (305) 567-9000 (Area Code & Daytime Telephone Number) JORGE E. OTERO, ESQ. (Name of Contact Person) Enclosed please find a check made payable to the 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**

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



## 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 it app			Departmen	t
2. This limited liabi	lity company was organized unde	r the laws of:	AC.		interes s
L10000116			SEE. FL	i	
4. I, V&E REAL ESTATI	E INVESTMENTS&MANAGEMENT LLC , , , , , , , , , , , , , , , , , ,	hereby resign as a MAI	VAGER (Print Title	<del>.,</del>	
of this limited liab	ility company and affirm the limit	• • •	been notif	fied of my	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				