#1/10000/179/

(Requestor's Name)		
(Address)		
(Addiess)		
(Address)		
(City/Ctata/Tin/Dhono #A		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
,		
Certified Copies Certificates of Status		
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ALLAHASSEE, FLORISH

K. SALY EXAMINER OCT 1 3 2011

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SOHO REAL ESTATE, L	
(Name of Limited	Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
KEITH W KOEHLER CPA	
(Contact Person)	
KOEHLER & COMPANY PA	
(Firm/Company)	
401 N HOWARD AVENUE	
(Address)	
TAMPA, FL 33606	
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
KEITH W KOEHLER at	<u>813</u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	se Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations
Clifton Building	P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



FILED 11 00T H PM 4: 25

SEUMETANT OF STATE TALLAHASSEE, FLORIDA

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	
of State is: SOHO REAL ESTATE, LL	<u>.C</u>
·	
2. This limited liability company was organized u	nder the laws of:
FLORIDA	
	→
7. The Place 3 and a second section (1)	* 1* ** 4 4 1* 1 ***
3. The Florida document/registration number of the L11000011791	us limited hability company is:
21100011731	'
4. I. DOUGLAS S GARDNER	, hereby resign as a MANAGER
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the I	imited liability company has been notified of my
resignation in writing.	,
Signature of Resigning Member, Managing Mem	mber or Manager
Filing Fee: \$25.00 (Required)	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	