## 1100015985

(Reque	estor's Name)	
(Address)		
(Addre	ss)	
(City/S	tate/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only

G. MCLEOD

JAN 0 6 2012

**EXAMINER** 



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BUKE TARY OF STATE
LLAHASSEF, FI ORIGINAL

## **COVER LETTER**

Division of Corporations	
SUBJECT: Cypress Vine Properties,	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:
Diana de la Torre	
(Contact Person)	
G & D Investors Group, LLC	
(Firm/Company)	,
1170 Tree Swallow Dr, Suite 152	
(Address)	
Winter Springs, FL 32708	
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
Diana de la Torre	(407) 437-0431 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th	
\$25 Filing Fee	\$55 Filing Fee &
<del></del>	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)

TO: Registration Section



FILED

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SECNETARY 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 a	
of State is: Cypress Vine Properties, L	.LC
2. This limited liability company was organized un Florida	nder the laws of:
3. The Florida document/registration number of the L11000075985	is limited liability company is:
<sub>4. I,</sub> G & D Investors Group, LLC	hereby resign as a MGRM
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the li resignation in writing.	mited liability company has been notified of my
Diana catatrue, Hen	ber.
Signature of Resigning Member, Managing Mem	iber or Manager

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: