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(Re	equestor's Name)		
(Address)			
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	· e #)	
PICK-UP	☐ WAIT	MAIL	
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2012 APR -6 PH 1: 08
SECRETARY OF STATE

J. BRYAN
APR - 9 2012

EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT: STRONGTOWER CAPITAL INVESTMENTS, 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:

BRANKOVIC NEDU_

(Contact Person)

STRONGTOWER CAPITAL INVESTMENTS, LLC

(Firm/Company)

TREET APT. 208

NORTH MIAMI BEACH, FL 33160

For further information concerning this matter, please call:

BRANKOVIC NEBOJSA at 786 312-4034

(Name of Contact Person) (Area Code & Daytime Telephone Number)

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:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

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 it TRONG TOWER		of the Florida Department VESTMENTS, LL (
2. This limited liabi	lity company was organized u L C - ANY AND	inder the laws of: ALL LAWFU	L BUSINESS
	ment/registration number of the 25263	his limited liability com	pany is:
(Frint NC	VIC NEBOJSA ame of Person Resigning)		(Frim Time)
resignation in writ	oility company and affirm the ting. He Royne	ilmited hability compan	y nas been nouned of my
	gning Member Managing Me	mber or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		TALLAHASSEE.

CR2E079 (5/06)