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(Re	questor's Name)				
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PICK-UP	WAIT	MAIL.			
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B. BOSTICK
DEC 1 1 2012

EXAMINER

## COVER LETTER

Division of Corporations
SUBJECT: Summit Woods, 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:
Kaney RattERAY (Contact Person)
Real Pro, Inc (Firm/Company)
220 N. State Road 7
Hollywood, FL 3302] (City/State and Zip Code)
For further information concerning this matter, please call:
Mary Batista at (954) 557 4251 = (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\square\$ \$\square\$ \$\\$\$ \$\\$\$ \$\\$\$ \$\\$\$ \$\\$\$ \$\\$\$ \$\\$\$ \$
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)

TO: Registration Section



## 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 of State is:	dimited liability con	mpany as it app	bears on the	records of t	he Florida	Depa	rtmen 	t
2. This limited liab	lity company was of Flonde	organized unde	r the laws o	of:				
3. The Florida docu	ment/registration r <b>00</b> 9085		limited liab	ility compan	y is:			
4. I, CARI	L Gold	beeg,	hereby res	ign as a M	aragi (Prim T	ng Title)	Me	mbee
of this limited liab resignation in wri	oility company and ting.	affirm the limi	ted liability	company h	as been no	tified	of my	•
Signature of Resi	gning Member, Ma	inaging Membe	er or Manag	ger	<b>1</b>	MERAL N	12 OEC	
Filing Fee: Certified Copy:	\$25.00 (Require \$30.00 (Options	*			7. 8. 35 \$1. 30 \$2. 30	SSECTION.	10 PM 1:01	