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(Address)			
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SECREMANY OF STATE
ALLAHASSEE, FLORINA

JAN 28 2016

## **COVER LETTER**

TO:

CR2E079 (2/14)

TO: Registration Section Division of Corporations	
,	
SUBJECT: WE HELP REA	LTY LLC
(Name o	of Limited Liability Company)
The enclosed member, resignation or di	ssociation and fee(s) are submitted for filing.
Please return all correspondence concer-	ning this matter to:
Alex Jerez	
(Contact Person)	
We Help Realty LLC	
(Firm/Company)	
13228 Hatherton Circle	
(Address)	2016 TALL
Orlando, FL 32832	SECRETARY CALLAHASSEE
(City/State and Zip Code)	2. 2. SS
For further information concerning this	matter, please call:
Alex Jerez	at ( 407 ) 286-5434 ORI 2
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made paya \$25 Filing Fee	able to the Florida Department of State for: ☐ \$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



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the of State is:	limited liability company as	c it appears on the records of the Florida Department
2. The Florida docu	_	ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:01/22/16
4. I, Frank de la O	Cruz lame of Person Resigning)	, hereby withdraw/resign as a
Manager	(Print Title)	
	bility company and affirm th	ne limited liability company has been notified of my
Signature of Di	ssociating Member or Resig	SECRETARY AND AN 21
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	F STATE