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#### **COVER LETTER**

Division of Corporations

SUBJECT: CB PLATE ESTATE MANAGEMENT LCC
(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:

A.J. KOONTZ

(Contact Person)

CB PEAL ESTATE MANAGEMENT, LLC

(Firm/Company)

1401 HWY M/A #207

(Address)

VERO BEACH, FL 32963

(City/State and Zip Code)

For further information concerning this matter, please call:

AJ KOONTZ at (772) 360-4586

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

Enclosed please find a check made payable to the Florida Department of State for:

#### 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

	mited liability company as it appe		-
2. This limited liabil	ity company was organized under	the laws of:	
L 130000	nent/registration number of this li	,	
4. I, RAYMOND A. COMPARE 177A, hereby resign as a MGRM  (Print Name of Person Resigning) (Print Title)			
	lity company and affirm the limit		,
Signature of Resig	ning Member, Managing Member	or Manager	2013 OCT
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		16 PM 1: 46