

L14000061006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

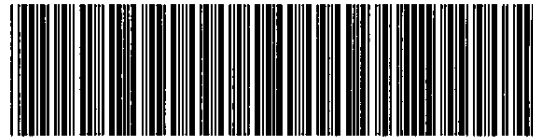
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 07 2014  
C. CARROTHERS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WHEELER REAL ESTATE LLC  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

**Karel Cabart**

\_\_\_\_\_  
(Contact Person)

**UScorp LLC**

\_\_\_\_\_  
(Firm/Company)

**351 W.Venice Ave.**

\_\_\_\_\_  
(Address)

**Venice, Florida 34285**

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

**Karel Cabart**

\_\_\_\_\_  
(Name of Contact Person)

at **941** **4836195**

(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



FILED

14 APR 28 AM 8:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 limited liability company as it appears on the records of the Florida Department of State is: WHEELER REAL ESTATE LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L 14000061006

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4/23/2014

4. I, KAREL CABART, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MANAGER

*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing

\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)