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R. WHITE

COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: D'LUX KEAL ESTATE SERVICES, 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:
TSABEL & PEREZ (Contact Person)
12460 3W 8 ST , STE208 (Address)
(City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
T 3APEL PEREZ at (305) 525-3306 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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 \$\Bigcup \\$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:

Registration Section Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (2/14)

Registration Section

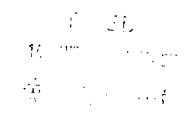
Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 3230!





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	as it appears on the records of the Florida Department
of State is: DLUX REAL	ESTATE SERVICES, LLC.
2. The Florida document/registration number	assigned to this limited liability company is:
14000 116123	· · · · · · · · · · · · · · · · · · ·
	resigned or will withdraw/resign is: 7-29-14
4.1, I SABEL G. PEREZ (Print Name of Person Resigning)	, hereby withdraw/resign as a
M& R (Print Title)	•
of this limited liability company and affirm resignation in writing.	the limited liability company has been notified of my
Signature of Dissociating Member or Rec	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	