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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: War Class Pearly Grap, ILC (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:
Dana Disanto (Contact Person)
Word: Class Realty Grap, LLC 1296 Camellia Ln, Weston, Fl 33326
1296 Camellia In, Weston, Fl 33326
Western, Fl 33326 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 610 - 475 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$\sum \\$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle Tallahassee, Florida 32301



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: Me	orld Class Realty Grap, LLC.
2. The Florida doc	ument/registration number assigned to this limited liability company is:
L1701	00179082
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 0831/201
4. I, W. Kon Bro	ame of Person Resigning), hereby withdraw/resign as a
r	nager (Print Title)
of this limited lial resignation in wri	bility company and affirm the limited liability company has been notified my ting.
Wilson	Branks alway
Signature of Di	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)
Certifica Copy.	Y =