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(Re	equestor's Name)						
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: M & E Properties, LLC (Name of Lim	DOCUMENT # L9400000271 nited Liability Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing	Member or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
	· ·
Jena Rissman Atlass	
(Name of Person)	
Savage & Atlass, P.L.	
(Firm/Company)	
801 NE 167 Street, Suite 302	
(Address)	
North Miami Beach, FL 33162	
(City/State and Zip Code)	
For further information concerning this matter, pa	lease call:
Jena Rissman Atlass	205 654 4404
(Name of Person)	at (305) 651-4101 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
✓ \$25 Filing Fee	\$55 Filing Fee &
CD2E079 (8/05)	Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

τ	Robin B. Osheroff				here	ehv resign as	Manager/Member			
r,		•					,	oo, toolgii uu	(Title)	
of	M	&	E	Properties,	LLC,	a	Florida	limited	liability	company
·-			,				Liability Com			
				ity company organ						ation.
				Add T						
				(Signature of re-	cionino r	nar	iaoèr manao	ing member a	or member)	

Robin B. Osheroff

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

CR2E079 (8/05)