

L9800001494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

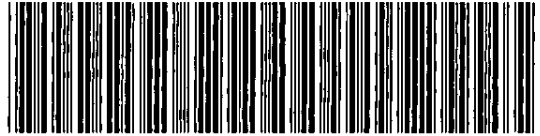
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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**ELLIOT P. BORKSON, P.A.**

1313 S. Andrews Avenue  
Fort Lauderdale, FL 33316  
Telephone: (954) 462-6360  
Facsimile: (954) 462-5225

November 11, 2008

Florida Department of State  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

RE: Emerald Asset Advisors, LLC  
Reference No: L98000001494

To Whom It May Concern:


Enclosed is the required Cover Letter along with a Resignation of Member, Managing Member or Manager from Florida or Foreign Limited Liability Company form. Please adjust the state records to reflect the resignation of Baruch (Bruce) Levy as a Manager and Member of the above-referenced company. A check in the amount of \$25.00 representing the required filing fee is also enclosed.

Please contact me if there is any additional information you need.

Sincerely yours,



[sent in his absence to avoid delay]

Elliot P. Borkson 

EPB:cvf  
Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** EMERALD ASSET ADVISORS, L.L.C.

(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:

Elliot P. Borkson, Esq.

(Contact Person)

Elliot P. Borkson, P.A.

(Firm/Company)

1313 S. Andrews Avenue

(Address)

Fort Lauderdale, FL 33316

(City/State and Zip Code)

For further information concerning this matter, please call:

Elliot P. Borkson, Esq.

(Name of Contact Person)

at ( 954 ) 462-6360

(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



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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

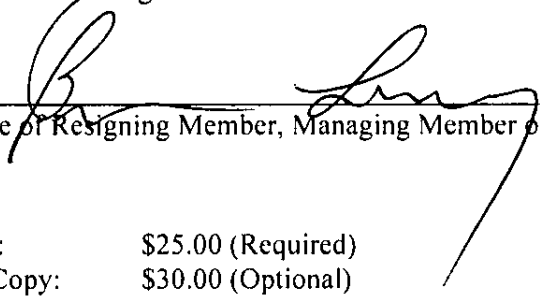
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: EMERALD ASSET ADVISORS, L.L.C.

2. This limited liability company was organized under the laws of:  
Florida

3. The Florida document/registration number of this limited liability company is:  
L98000001494

4. I, Baruch (Bruce) Levy, hereby resign as a Manager, Member  
*(Print Name of Person Resigning)* *(Print Title)*

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

  
\_\_\_\_\_  
Signature of Resigning Member, Managing Member or Manager

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