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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	.v
SUBJECT: LONSOLIDATED PROPER	ited 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:
GLENN STEIN (Name of Person)	<u></u> .
(Firm/Company)	
1008 ERST SILVER SPRINGS K	BLVO
OCALA, FLORIDA 34470 (City/State and Zip Code)	
For further information concerning this matter, p	lease call:
GLENN STEIN (Name of Person)	at (351) 624-1333 (Area Code & Daytime Telephone Number)
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
Enclosed is a check for the following amount:	
▼\$25 Filing Fee CR2E079 (8/05)	\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, JERRIE CORPE	, hereby resign as Manacine Memasa	
of CONSOLIDATED PROPERTY SERV	vices // (Title)	
a limited liability company organized under the la		
Jarrie Corp	SECRETARY OF STATE AHASSEE FLORIC	

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