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PICK-UP	WAIT	MAIL
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COVER LETTER

TO: Registration Section
Division of Corporations

(Name of Limited Liab	ility Company)	
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing Member	er or Manager and fee(s) are submitted for filir	
Please return all correspondence concerning this matter t	o the following:	
Charles J. DiPardo, C.P.A.		
(Name of Person)		
	IAS 200	
Edwin Andrews & Company, P.A.		
(Firm/Company)	ECRETARY OF STATE	
	AR.	
6574 N. State Road 7, PMB 115	E C	
(Address)		
	温音 (
Coconut Creek, FL 33073-3625		
(City/State and Zip Code)		
For further information concerning this matter, please cal	и:	
Charles J. DiPardo, C.P.A. at (_98	54 753-5900	
	ea Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
✓ \$25 Filing Fee	\$55 Filing Fee &	
[*] \$\pi_2\pi_1\text{Imig 1.00}	Certified Copy	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

, Joseph L. Kohn , hereby resign as Managing Member			
· · · · · · · · · · · · · · · · · · ·	(Title)		
of The Loan Lawyer, LLC			
(Limited Lial	bility Company)		
a limited liability company organized under the	laws of the State of Florida	200	
and affirm that the limited liability company has (Signature of resigning manage)	s been notified in writing of the resignation. ARR STR STR STR STR STR TOTAL T, managing member or member)		

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

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