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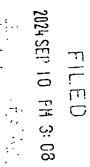
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
CUBI	ECT: ALTMAN/GEBAM FUNDIN	RG LTD	
SUDJ	Name of Limited Pa	rtnership or Limited Liabi	lity Limited Partnership
DOC	UMENT NUMBER: A04000000		
The e	nclosed Resignation of Registere	ed Agent and fee(s) ar	e submitted for filing.
Please	return all correspondence conc	erning this matter to:	
Jeffrey	A. Deutch		
	Contact Person		•
Nelson	Mullins Riley & Scarborough LLP		
	Firm/Company		•
1905 N	W Corporate Boulevard, Suite 310		
•	Address		-
Boca F	Raton, FL 33431		
	City, State and Zip Co	ode	•
Jeffrey	.Deutch@nelsonmullins.com		
E	-mail address: (to be used for future ar	nnual report notification)	•
For fu	rther information concerning th	is matter, please call:	
Jeffrey	A. Deutch	561 at (	343-6960
N	ame of Contact Person		nd Daytime Telephone Number
Enclo	sed is a check made payable to t	he Florida Departmen	t of State for:
<b>□</b> \$87	7.50 Filing Fec ☐ \$140	.00 (\$87.50 Filing Fee an	d \$52.50 Certified Copy Fee)
Amen	ng Address: dment Section on of Corporations	Amend	Address: ment Section on of Corporations
P.O. E	Box 6327	The Ce	ntre of Tallahassee
Tallah	assee, FL 32314		l. Monroe Street, Suite 810 assee, FL 32303

## RESIGNATION OF REGISTERED AGENT FOR LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

Pursuant to the provi	sions of section 620.1116. Florida Statutes, the undersigned.		
Jeffrey A. Deutch P.A.	, hereby resigns as		
	Name of Registered Agent		
Registered Agent for	Name of Limited Partnership or Limited Liability Limited Partnership		
<b>.</b>	Name of Limited Partnership or Limited Liability Limited Partnership		
A04000000663			
Florida Documen	Number, if known		
the Florida Departn	Signature of Registered Agent		
	Jeffrey A. Deutch P.A.		
-	Typed or Printed Name		
	President		
-	Capacity		

Filing Fee: \$87.50 Certified Copy (optional): \$52.50