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(Re	equestor's Name)			
(Ac	ldress)			
·	ddress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
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COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT: CAPITAL ACC	CESS GROUP II C			
SUBJECT: CAPITAL ACCESS GROUP, LLC (Name of Limited Liability Company)				
Dear Sir or Madam:				
The enclosed Resignation of Member, Managing	Member or Manager and fee(s) are submitted for filing.			
Places return all as magnandones concerning this	matter to the following:			
Please return all correspondence concerning this r	matter to the following.			
LEE H. HASKIN				
(Name of Person)				
	ALLAMASSEE, FLORIDA			
(Firm/Company)	255			
OOOA NIM Oomoonto Divil Oute	平 圣			
2201 N.W. Corporate Blvd., Suite 2	201 22.5			
(Audiess)	Religion			
Boca Raton, FL 33431				
(City/State and Zip Code)				
For further information concerning this matter, ple	ease call:			
Lee H. Haskin	at (561) 988-7098			
(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations Clifton Building	Division of Corporations 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 &			
CR2E079 (8/05)	Certified Copy			



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, LEE H. HASKIN	, hereby resign as	MANAGER
		(Title)
of CAPITAL ACCES	SS GROUP, LLC	
(Limited Liabi	llity Company)	•
a limited liability company organized under the la	aws of the State of	FLORIDA ,
and affirm that the limited liability company has been designed of resigning manager,		2005 DF

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