602000031708

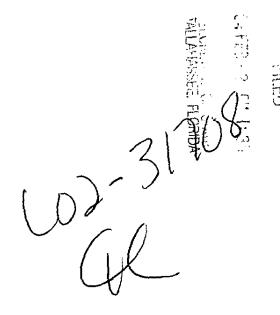
(Re	equestor's Name)				
(Address)						
(Ad	ldress)					
	·					
C	ty/State/Zip/Phon	~ **				
(Cil	lyrolaterZipr=floft	e #)				
T PICK-UP	TIAW	MAIL				
						
(Bu	siness Entity Na	me)				
(Do	cument Number)					
Certified Copies	Certificates	s of Status				
	-					
		 -				
Special Instructions to I	Filing Officer:	Ì				
		į				
		}				
		}				
		1				
		į				

Office Use Only



200027986662

02/02/04--01080--014 **140.00



TRANSMITTAL LETTER

ANGEL FINANCIAL HOLDINGS, L.L.C. SUBJECT:			
(Name of Corporation)			
DOCUMENT NUMBER: L02000031708			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing	g.		
Please return all correspondence concerning this matter to the following:			
Timothy G. Schoenwalder, Esq.			
(Name of Person)			
(Name of Firm/Company)			
123 South Calhoun Street			
(Address)			
Tallahassee, FL 32301	Z ∷	5	
(City/State and Zip Code)			
For further information concerning this matter, please call:		. •3	-1
Angel de Para at (305) 228-1786 (Name of Person) (Area Code & Daytime Telephone Number)	EL PLONIDA	7.	

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section Division of Corporations

TO:

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Manager RESIGNATION FOR A Limited Liability Company

	ANGEL DE PARA	t	MANAGER		
I,		, ne	reby resign as	(Title)	
of	A	NGEL FINANCIAL HO	DINGS, L.L.C.	- <u>-</u>	,
		(Name of Corporation)			
	L02000031708 (Document Number, if know	,a ((C	organized under the	laws of the State of	
	Florida				
		Cyclde (Sjenature of resign	Parening officer/director)	TALLAHASSEE, FL	

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314