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(Requestor's Name)	***EERHASS	ET. FLORIO,
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(Address)		
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PICK-UP WAIT	MAIL	(63433406010 410 01
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(Business Entity Name)		
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Certified Copies Certificates of Statu	rs	
Special Instructions to Filing Officer:		
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Office Use Only

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COVER LETTER TO: Registration Section Division of Corporations 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: (Firm/Company) For further information concerning this matter, please call: (Name of Person) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

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

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I,, hereby resign as
Director Construction 110
of
a limited liability company organized under the laws of the State of HOTOG
and affirm that the limited liability company has been notified in writing of the resignation.
(Signature of resigning manager, 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