L03000033580

(Requestor's Name)				
(Address)				
,				
(Address)				
(City/State/Zip/Phone #)				
•				
PICK-UP WAIT MAIL				
•				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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300111998143

RA Resign



11/06/07--01028--019 **267.50



111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

October 31, 2007

RE: BAKER STEWART & KING, INC. (FL. DOM.)
DFS CAPITAL FUNDING, INC. (IN. DOM.)
NATIONAL HOUSING GROUP CORP (FL. DOM.)
NAPLES BAY INVESTORS, LLC (FL. DOM.)
OAE HOLDINGS, LLC (FL. DOM.)

Secretary of State Corporate Records Bureau Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Dear Sir: or Madam;

We enclose resignation executed in duplicate, by the agent for service of process for the above Limited Liability companies. Also enclosed is ____ check in the amount of ___\$267.50

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-addressed envelope.

Very truly yours,

C T CORPORATION SYSTEM

Thoresa Alfiori (nh)

Theresa Alfieri Assistant Secretary TA:nh Encl.

RESIGNATION OF REGISTERED AGENT FOR A LIMITED **LIABILITY COMPANY**

			B 1
			355 1
Pursuant to the provision	ns of section 608.416(2) or 608.509, Florida Sta	atutes, the undersigned,	The state of
C T CORPORATION	SYSTEM	, hereby resigns as	15 mm 10
(Name of Registered Agent)		_,	Electric Marie Mar
Registered Agent for			
NAPLES BAY INVES	TORS, LLC.		Allie
	(Name of Limited Liability Company)		, , ,
200454136			
(Document Numi	per, if known)		
A copy of this resignation	n was mailed to the above listed limited liabilit	ry company at its last kno	wn address.
The agency is terminated	and the office discontinued on the 31st day af (Signature of Rengning Agent)	ter the date on which this	statement is filed.
If signing on behalf of a	n entity:		
	C T CORPORATION SYSTEM - Theresa A	Alfieri	
	(Typed or Printed Name) ASSISTANT SECRETARY		
	(Capacity)		

FILING FEES:

\$ 85.00 \$ 25.00

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314