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## **COVER LETTER**

TO: Registration Section Division of Corporations	· · · ·	
SUBJECT: ANM FUNDING LLC	imited Liability Company)	
(114110 01 114	amos Diasiniy Company)	
Dear Sir or Madam:		
The enclosed Resignation of Member, Managir	ng Member or Manager and fee(s) are submitted	for filing
		B,
Please return all correspondence concerning thi	s matter to the following:	
DDOD DENI ALIADONI		
DROR BEN-AHARON (Name of Person)		
(Name of Person)		
ANM FUNDING LLC		
(Firm/Company)		<b>29</b>
		<b>26.</b> 7 SEC
1131 NE 163RD STREET		
(Address)		SECRETARY OF STATE DIVISION OF CORPORATION 2006 JUN 21 PM 3: 07
	F	
NORTH MIAMI BEACH FL 3316	2	T OR.
(City/State and Zip Code)	<del></del>	ATTE
For further information concerning this matter,	please call:	7
DROR BEN-AHARON	at (305 ) 944-5040	
(Name of Person)	(Area Code & Daytime Telephone Number	<u>r)</u>
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount	:	
<b>✓</b> \$25 Filing Fee	□\$55 Filing Fee &	
CR2E079 (8/05)	Certified Copy	



SECRETARY OF STATE OIVISION OF CORPORATIONS 2006 JUN 21 PM 3: 07

# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, DROR BEN-AHARON	, hereby resign as CEO
	(Title)
of ANM FUNDING LLC	
(Lin	mited Liability Company)
a limited liability company organized un	der the laws of the State of FLORIDA
and affirm that the limited liability comp	pany 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