104 0000 65885

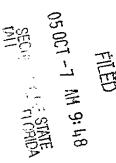
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(Address)
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COVER LETTER

TO: Registration Section Division of Corporations			٠
SUBJECT: ANGELS GRICL LLC (Name of Limited Liability Company)		•	
Dear Sir or Madam:			
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted	ted for fili	ng.	
Please return all correspondence concerning this matter to the following:			
MARTIN G-RAY (Name of Person)	īas Va	05	
(Firm/Company)		OCT	
615 ROBIN RO #1	TAREST OF STATE	05 OCT -7 AM 9:48	FILED
(City/State and Zip Code)	ORIDA	9: 48	٠
For further information concerning this matter, please call:			
MARTIN GRAG at (863) 648-4431 (Name of Person)/ (Area Code & Daytime Telephone Num	nber)		

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:

\$55 Filing Fee & Certified Copy

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, MALTIN A GRAY, hereby resign as MEMBER/MANAGEN
of ANGELS GALL CCC (Limited Liability Company)
a limited liability company organized under the laws of the State of FLORIDA,
and affirm that the limited liability company has been notified in writing of the resignation.
Modeling The Grand (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