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SECRETARY OF STATE
TALL AHASSEF, FLORID!



65-90713

COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT: ELEANORE PROPERTIES, LLC				
(Name of Limite		pany)		
Dear Sir or Madam:				
The enclosed Resignation of Member, Managing M	dember or Ma	anager and fee(s) are submit	ted for filing.	
Please return all correspondence concerning this ma	atter to the fo	ollowing:		
Stephanie Weatherford				
(Name of Person)		_	uumaa ku a	
Home & Ranch Real Estate Company			2006 OCT -3 SECRETAR) FALLAHASS	CSF
(Firm/Company)		_	HXX ETA	ens.
825 E Cowboy Way #105		_		1
(Address)			ANTI: 11 of state e, florid	⊢∓! i ų,
LaBelle FL 33935			震气 二	
(City/State and Zip Code)		_		
For further information concerning this matter, plea	ase call:			
Stephanie Weatherford	at (863	_)_612-0000	<u>. </u>	
(Name of Person)		& Daytime Telephone Nur	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	1	
Enclosed is a check for the following amount:				
\$25 Filing Fee CR2E079 (8/05)	✓ \$	S55 Filing Fee & Certified Copy		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I. Stephanie Weatherford	, hereby resign as Manager
	(Title)
of ELEANORE PROPERTIES, LLC	
(Limite	ed Liability Company)
a limited liability company organized unde	r the laws of the State of Florida
and affirm that the limited liability compan	y has been notified in writing of the resignation.
Stolina	and fed
(Signature of resigning ma	anager, 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

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