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(Requestor's Name)				
(Address)				
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	•			
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL	•			
(Business Entity Name)	<u>.</u>			
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Certified Copies Certificates of Status	<u>.</u>			
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SECRETARY OF STATE
SECRETARY OF STATE
OF THE SECRE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: RAINBOW 21 (Name of Limited I	, LLC
(Name of Limited I	Liability Company)
The enclosed member, managing member or man filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
ANGELICA SIGLER (Contact Person)	
(Contact Person)	
ı	
(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
15476 NW 77 ct (Address)	#314
15476 NW 77 ct (Address) MiAMi lakes, FL. 3301 (City/State and Zip Code)	16
For further information concerning this matter, p	lease call:
ANGE/iCA SIG/GR at (Name of Contact Person)	(305) 332-2793 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as Zainbow 21, L2		of the Florida Department
2. This limited liab	ility company was organize	d under the laws of:	
	nment/registration number o	•	pany is:
4. I,	ame of Person Resigning)	, hereby resign as a _	MANAGER (Print Title)
	pility company and affirm th		
Signature of Resi	gning Member, Managing N	Member or Manager	
	\$25.00 (Required) \$30.00 (Optional)		09 : SE

CR2E079 (5/06)

FILED

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SECRETARY OF STATE