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(Re	equestor's Name)	
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SECRETARY OF STATE
ALL AHASSES ELOBBE

COVER LETTER

TO: Registration Section Division of Corporations		
Division of Corporations		
SUBJECT: LARLIN INVESTMENTS, LLC (Name of Limited	d Liability Company)	
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing M	lember or Manager and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
LAWRENCE ROASEAU, 43 HARBOUR HOUSE, KE	Y LARGO, FL 33037	
(Name of Person)	···	
(Firm/Company)		
(Address)		
(Audicss)		
(City/State and Zip Code)		
For further information concerning this matter, plea	se call:	
CANDDA LVAIN FOO	005	
	247-6521	
(Name of Person)	(Area Code & Daytime Telephone Number)	
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	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
▼ \$25 Filing Fee	\$55 Filing Fee &	
CR2E079 (8/05)	Certified Copy	
Armen's factory		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, 1031 EXCHANGE CORPORATION	, hereby resign as MANAGING MEMBER
	(Title)
of LARLIN INVESTMENTS, LLC	
(Limited Liab	bility Company)
a limited liability company organized under the l	laws of the State of FLORIDA
and affirm that the limited liability company has	been notified in writing of the resignation.
Subu M (Signature of resigning manage)	r, 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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