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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
				
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SECRETARY OF STATE DIVISION OF CORPORATIONS



COVER LETTER •

TO: Registration Section Division of Corporations				
SUBJECT: #1 Real Estate Academy, I	LLC ted Liability Con	npany)		
Dear Sir or Madam:				
The enclosed Resignation of Member, Managing	Member or M	anager and fee(s) are submitted for	filing	5 ,
Please return all correspondence concerning this n	natter to the fo	ollowing:		
Rhonda S.W. Ieracitano (Name of Person)		_		
(Name of Ferson)				
(2) (2)		-		
(Firm/Company)				
105 Westmoreland Circle				
(Address)		_	. 22	9/
Kissimmee, FL 34744			11 JUL 300	SECH /1510
(City/State and Zip Code)		_		SETAT
For further information concerning this matter, please call:			CORP.	
Dhanda C.W. Iaraaitana	004	004 5470	PH 2: 44	Y OF STATE ORPORATIONS
Rhonda S.W. Ieracitano (Name of Person)	at (321	624-5476 e & Daytime Telephone Number)	4	NON:
(Number of Person)	(Mea coa	· ·		71
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:				
✓ \$25 Filing Fee CR2E079 (8/05)		\$55 Filing Fee & Certified Copy		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

ı, Rhonda S.W. leracitano	, hereby resign as Manager		
	(Title)		
of#1 Real Estate Academy, LLC			
(Limited Liability	y Company)		
a limited liability company organized under the law	s of the State of Florida		
and affirm that the limited liability company has be	en notified in writing of the resignation.		
Tope Obles bia	cetad.		
(Signature of resigning manager, m	nanaging 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

2006 JUL 11 PM 2: LL