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K. SALY EXAMINER FEB 24 2011

COVER LETTER

TO: Registration Section				
Harobed 1, LLC; Harobed 3, LLC; Harobed 4, LLC; Harobed II, LLC; SUBJECT: Harobed N, LLC; Harobed VII, LLC; Harobed VIII, LLC; (Name of Limited Liability Company) Harobed 8, LLC; The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.				
			Please return all correspondence concerning this	matter to:
			Deborah Higgins	
			(Contact Person)	
(Firm/Company)				
213 Ave D SW (Address)				
Winter Haven FL 33 (City/State and Zip Code)	880			
For further information concerning this matter, p	lease call:			
Deborah Higgins at ((Name of Contact Person)	Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the \$25 Filing Fee \$10 =\$250	Florida Department of State for: \$55 Filing Fee & Certified Copy			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations P.O. Box 6327			
Clifton Building 2661 Executive Center Circle	Tallahassee, Florida 32314			

CR2E079 (5/06)

Tallahassee, Florida 32301



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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

3	limited liability company as it appears on the records of the Florida Department about 1, UC.
2. This limited liab	pility company was organized under the laws of:
	ument/registration number of this limited liability company is:
4. I, <u>Debor</u>	ah Hagins, hereby resign as a Managing Member (Print Tifle)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
vOelma	h H
Signature of Res	igning Member, Managing Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)