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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL	
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Certified Copies	_ Certificates	s of Status	
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Special Instructions to Filing Officer:			
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

J. 17

SUBJECT: Paul Hartman Real Estate, LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Ricou E. Hartman

(Contact Person)

Hartman Real Estate

(Firm/Company)

4209 SW High Meadows Ave.

(Address)

Palm City, FL 34990

(City/State and Zip Code)

For further information concerning this matter, please call:

Ricou Hartman

 $_{at}(772) 287-4690$

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

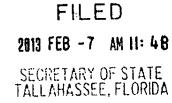
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)





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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the	limited liability company as	t appears on the records of the Florida Department
of State is: Pau	ıl Hartman Real Estate,	LLC .
2. This limited liab	ility company was organized	under the laws of:
State of Flor	ida	*,
		this limited liability company is:
L060000410)42	
_{4. I,} Ricou E. Hartman		, hereby resign as a Managing Member
(Print Name of Person Resigning)		(Print Title)
of this limited lial resignation in wr		limited liability company has been notified of my
Lecon F.	Hont	
Signature of Resi	gning Member, Managing M	ember or Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	-