L06000045059

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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Dif financial Group W.C. (Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing
Please return all correspondence concerning this matter to the following:
Doma Lhodes.
(Name of Person) What Financial Group LLC (Firm/Company)
9501 Lily Back Cf.
Rifiera Beach, the 33407. (City/State and Zip Code)
For further information concerning this matter, please call: Dona Phodes: at (754) 402-4091 (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\times \text{CR2E079 (8/05)}\$



July 3, 2006

DONNA RHODES 9501 LILY BANK COURT RIVIERA BEACH, FL 33407

SUBJECT: DH FINANCIAL GROUP, LLC.

Ref. Number: L06000045059

We have received your document for DH FINANCIAL GROUP, LLC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong forms.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 106A00043332

Neysa Culligan Document Specialist



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Kris An Grant, hereby resign as MGRM
of DA Group HC (Title)
(Limited Liability Company)
a limited liability company organized under the laws of the State of Horida
and affirm that the limited liability company has been notified in writing of the resignation.
A .
Ris-ann Grant
(Signature of resigning manager, 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