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SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

_	stration Section sion of Corporations	
2	or or our permitted.	
SUBJECT:	RE/MAX in Florida, LLC	
	(Name of Limited Lial	bility Company)
The enclose filing.	d member, managing member or manag	ger resignation and fee(s) are submitted for
Please return	n all correspondence concerning this ma	atter to:
Donald	J. Hachenberger	
	(Contact Person)	
RE/MAX	K in Florida, LLC	
	(Firm/Company)	
745 Pri	mera Blvd, Ste. 1021	
	(Address)	
Lake M	ary, FL 32746	
	(City/State and Zip Code)	
For further i	nformation concerning this matter, plea	ase call:
Donald	J. Hachenberger at (407 829-7303 rea Code & Daytime Telephone Number)
1)	Name of Contact Person) (Ar	rea Code & Daytime Telephone Number)
Enclosed plo	ea <u>se f</u> ind a check made payable to the F	lorida Department of State for:
	\$25 Filing Fee	✓ \$55 Filing Fee &
		Certified Copy
	OURIER ADDRESS:	MAILING ADDRESS:
Registration		Registration Section
	Corporations	Division of Corporations
Clifton Buil	•	P.O. Box 6327
	tive Center Circle	Tallahassee, Florida 32314
i ananassee,	, Florida 32301	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	nited liability company as it MAX in Florida, LL		of the Florida Department
2. This limited liabilit Florida	y company was organized u	nder the laws of:	
3. The Florida docum <u>L06000094</u>	ent/registration number of the	nis limited liability con 	npany is:
4. I, Richard D.	Miller	, hereby resign as a	MGRM
	e of Person Resigning) ty company and affirm the l	imited liability compa	(Print Title) ny has been notified of my
of Iller	Anh		
Signature of Resign	ing Member, Managing Me	mber or Manager	
•	\$25.00 (Required) \$30.00 (Ontional)		
	\$25.00 (Required)	mber or Manager	