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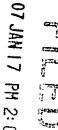
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SECRETARY OF STATE ALLAHASSEE FLORIT



## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Cirrus Consulting Group LL (Name of Limited Lia	
The enclosed member, managing member or mana filing.	
Please return all correspondence concerning this m	natter to:
Jerry Lowenstein	
(Contact Person)	
Cirrus Holding Corp.	SEC
(Firm/Company)	CRETARY AHASSI
6550 N Federal Highway #510	SEE 7
(Address)	
Ft. Lauderdale, FL. 33308	PM 2: 02  OF STATE EFI.ORIDA
(City/State and Zip Code)	
For further information concerning this matter, ple	ase call:
Jerry Lowenstein at (_	
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for:  \$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)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	imited liability company as it apus Consulting Group LL		f the Flo	rida De	partn	nent 
	lity company was organized und artment of State	er the laws of:		SECRETAR TALLAHASS	07 JAN 17	
3. The Florida docu L06000097	ment/registration number of this 227	limited liability compa	any is:	Y OF STATE	7 PH 2: 02	
4. I, Cirrus Holo	ling Corp.  me of Person Resigning)	, hereby resign as a N	IGRM (Pri	int Title)		<del></del>
of this limited liab	ility company and affirm the lim	ited liability company	has been	n notifi	ed of	my
	verus	- ·				
signature of Resig	ning Member, Managing Memb	er or Manager				
Filing Fee:	\$25.00 (Required)					
Certified Copy:	\$30.00 (Optional)					