W6000/16701

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2008 APR 10 AM 10: 58
SECRETARY OF STATE

T. CLINE

APR 1 1 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CIRCLE of Light, L (Name of Limited Liability Co	ompany)
The enclosed member, managing member or manager resifiling.	ignation and fee(s) are submitted for
Please return all correspondence concerning this matter to	y:
Nancy CIAF, ESQ.	<u> </u>
MA	200 SE TAL
(Firm/Company)	CRE LAI
2238 SW 27 TERKACE (Address)	SECRETARY OF STATE ALLAHASSEE, FLORIO
MIAMI, FL 33/33 (City/State and Zip Code)	STATE LORIOA
For further information concerning this matter, please call	:
Nancy Cliff, ESQ at (305 (Name of Contact Person) (Area Cod	e & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314
200. Baccarre Contor Chere	1 411411411414 , 1 101144 2221 1

CR2E079 (5/06)

Tallahassee, Florida 32301



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 of State is:	limited liability company as it appears on the records of the Florical CIRCLE of Light, LLC	rida Department
	ility company was organized under the laws of: Of Floridal	2008 APR 10 SECRETARY
	ument/registration number of this limited liability company is:	AHIO: 5
4. I, Dana (Print N	EVange (ISTO), hereby resign as a Manag	ging Members ni Tide)
of this limited lial resignation in wr	bility company and affirm the limited liability company has been iting.	n notified of my
1/mas	Wingeloote	
Signature of Resi	gning Member, Managing Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	