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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

Division of Corporations	
SUBJECT: Giraffe Home Investing	
(Name of Lin	nited Liability Company)
The enclosed member, managing member of filing.	r manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
Julia A. Lentz	
(Contact Person)	
Giraffe Home Investing Group, L	LC
(Firm/Company)	
7845 Quail Hollow Blvd.	1
(Address)	
Wesley Chapel, FL 33544	
(City/State and Zip Code)	
For further information concerning this matt	er, please call:
Julia A. Lentz	at ( 813 ) 973-2300
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable	to the Florida Department of State for: \$55 Filing Fee &
\$25 Filing Fee	Certified Copy
	Collined Copy
STREET/COURIER ADDRESS:	<b>MAILING ADDRESS:</b>
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	Tananassee, 1 longa 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

	limited liability company as affe Home Investing (		ne Florida Departmen
******	nility company was organized		
3. The Florida doc L0700000	ument/registration number of 3445	this limited liability company	y is:
4. I, Gerald S.	Lentz	, hereby resign as a MC	SRM
(Print N	lame of Person Resigning)		(Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability company ha	as been notified of my
Secold	1 Lenk		
Signature of Res	igning Memb <del>er, M</del> anaging M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		

CR2E079 (5/06)

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SECRETARY OF STATE
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