L0700010408D

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

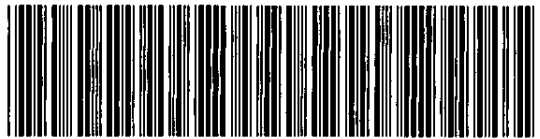☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY -2 PM 2: 27

T. HAMPTON

MAY - 5 2008

EXAMINER

COVER LETTER

TO: Registration Section
         Division of Corporations

SUBJECT: GCHS Investments, LLC
               _____
               (Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Alberto Mejia
_____
(Contact Person)

ANM Management, LLC
_____
(Firm/Company)

3360 Paddock Road
_____
(Address)

Weston, FL 33331
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

Alberto Mejia   at (954) 931- 1776
_____   _____
(Name of Contact Person)   (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ $25 Filing Fee   ☒ $55 Filing Fee &
                              Certified Copy

STREET/COURIER ADDRESS: **MAILING ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
Clifton Building   P.O. Box 6327
2661 Executive Center Circle   Tallahassee, Florida 32314
Tallahassee, 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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: __GCHS Investments, LLC__ .

2. This limited liability company was organized under the laws of:
   __Florida__ .

3. The Florida document/registration number of this limited liability company is:
   __L07000104080__ .

4. I, __ANM Management, LLC__ , hereby resign as a __Managing Member__
   (Print Name of Person Resigning) *(Print Title)*

   of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

   _____
   Signature of Resigning Member, Managing Member or Manager

Filing Fee: $25.00 (Required)
Certified Copy: $30.00 (Optional)

08 MAY -2 PM 2:27
FILED SECRETARY OF STATE
DIVISION OF CORPORATIONS