

0700011480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

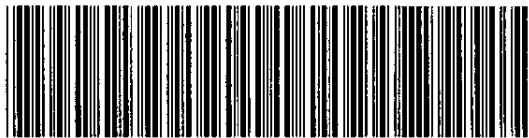
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100112556421

12/03/07--01014--003 **25.00

FILED
07 DEC 13 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DB

12/13

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Chacar, LLC

(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah A. Rotman

(Name of Person)

Chacar, LLC

(Firm/Company)

6 Cassie Ct.

(Address)

Ormond Beach, FL 32174

(City/State and Zip Code)

07 DEC 13 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Deborah A. Rotman at (**386**) **383-1983**

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2007

DEBORAH A. ROTMAN
6 CASSIE CT.
ORMOND BEACH, FL 32174

SUBJECT: CHACAR, LLC
Ref. Number: L07000111480

FILED
07 DEC 13 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CHACAR, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person resigning and the person signing the resignation document must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 307A00068511



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: Chacar, 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: 60700011480

4. I, Wayne E. Rotman, 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.

Wayne E. Rotman
(Signature of Resigning Member, Managing Member or Manager)

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

FILED
07 DEC 13 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA