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EXAMINER

COVER LETTER

Division of Corporations	
Division of Corporations	
GENERAL MIELKGE II C	
SUBJECT: HIF-LKGF, LLC (Name of Limited)	l Liability Company)
`	• • •
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning this	is matter to:
Richard Hayes	
(Contact Person)	
	ZOII
Hayes & Associates, CPA PA	LCRI
(Firm/Company)	HAA N
	RY SSE
115 W Gore St	
(Address)	2011 NOV 28 PM 1: 44 SECRETARY OF STATE TALLAHASSEE, FLORID
	RATE A.
Orlando FL 32806	>
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Richard Hayes a	t (407) 894-6722
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
	1 11 11 12 4 4 604 6
Enclosed please find a check made payable to t \$\subseteq \frac{1}{2} \\$25 Filing Fee	\$55 Filing Fee &
\$23 Filmg Fee	Certified Copy
	Columba Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
IDDI = VORIIIIVA I ADIAT I ITAIA	FULLUDUODEE HIMPING \$731A

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: HIF-		s it appears on the records of th	e Florida Departme	1t
2. This limited liab	ility company was organized	l under the laws of:		
3. The Florida doc L0800004777	•	f this limited liability company	<i>'</i> is:	
4. Ι, <u>Laura Kaime</u> (Print λ	-Gaspar Finer ame of Person Resigning)	, hereby resign as a mem	nber / MGRM (Pfint Title)	
of this limited lia resignation in wr		e limited liability company ha	s been notified of m	y
Signature of Resi	gning Member, Managing M	1ember or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		2011 NO SECRET	T