

L08000055710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

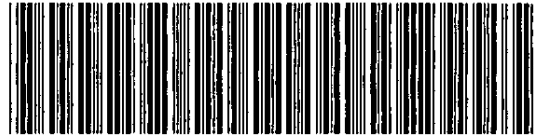
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
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J. BRYAN

AUG 28 2008

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Falk Improvement Fund 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:

Natasha Jarrett Phone: 786-301-9019  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)  
13901 SW 90th Ave E118  
(Address)

Miami, FL 33176  
(City/State and Zip Code)

For further information concerning this matter, please call:

Natasha Jarrett at (786) 301-9019  
(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:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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**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: The Falls Improvement Fund 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:  
FEI 30-0488288  
LO8000055710

4. I, Natasha Jarrett, hereby resign as a Manager.  
(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] 8/25/2008  
Signature of Resigning Member, Managing Member or Manager

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

**The Falls Improvement Fund L.L.C.**

Natasha Jarrett

CC: Mamie Attar

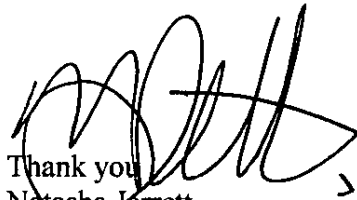
Joseph Feheley

Rufino Valdez

8/23/08

**Attn: Florida Department of State Division of Corporations**

This letter serves as confirmation of my resignation as a member from the Falls Improvement Fund LLC. I release all rights and responsibility to the remaining members registered with the Florida Department of State. The reason for my resignation is for a compelling event in which the registered agent has been notified.



Thank you  
Natasha Jarrett  
786.301.9019

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