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SECRETARY OF STATE HE SHOW OF FEB 12 PM 3: 55

J. BRYAN

FEB 1 3 2009

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: United Hope (Group, LLC
(Name of Lim	ited Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
Troy Salvo	•
(Contact Person)	
United Hope Group, LL0	09 FEB 12 PH 3: 55
(Firm/Company)	8 7
3350 NE 4th Ave.	7
(Address)	<u></u>
Boca Raton, FL. 3343	31
(City/State and Zip Code)	
For further information concerning this matt	er, please call:
Troy Salvo	at (561) 441-5978
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$\frac{1}{\sqrt{25}}\$ Filing Fee	to the Florida Department of State for: \$55 Filing Fee &
V 425 1 milg 1 66	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee Florida 37314

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	limited liability company as	s it appears on the records of t	he Florida Department
of State is:	United Hope G	roup, LLC	· · · · · · · · · · · · · · · · · · ·
	ility company was organize Florida	d under the laws of:	OPFEB 12
	ment/registration number o	of this limited liability compan	0F CORPORATION 12 PM 3: 55
····,	n Carotta ame of Person Resigning)	, hereby resign as a	MGR (Print Title)
of this limited liab resignation in wri	oility company and affirm U	he limited liability company had been been or Manager	,
	\$25.00 (Required) \$30.00 (Optional)		