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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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C. LEWIS

DEC 2 2 2011

EXAMINER

COVER LETTER

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: AC HOMES LLC	
(Name of Limi	ted Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning to	this matter to:
RICHARD WASERSTEIN	
(Contact Person)	
(Firm/Company)	
1124 KANE CONCOURSE	
(Address)	
BAY HARBOR ISLANDS, FL 331	154
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
CRISTINA MAZUERA	at (305) 984-1232
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	o 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	



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SECRETARY OF STATE FALLAHASSEE, FLORIDA

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 lir of State is: AC H	nited liability company as it ap	opears on the records	s of the Florida De	partment
2. This limited liability FLORIDA	ty company was organized und	ler the laws of:		
3. The Florida docum <u>L110000411</u>	ent/registration number of this	limited liability cor	npany is:	
4. I, ANTONIO DUQUE (Print Name of Person Resigning)		, hereby resign as a	MANAGING (Print Title)	<u>MEM</u> BER
	ity company and affirm the lin	nited liability compa	ny has been notific	ed of my
A	7			
Signature of Resign	ning Member, Managing Memb	per or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			