M04000001733

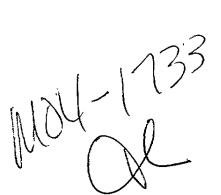
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04/22/05--01016--018 **35.00



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: FAR Property Management Company, LLC (Name of Corporation)
DOCUMENT NUMBER: CORP. Number: LLC4031-2004 FIN# 45-1218808
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Adrienne N. Carr (Name of Person)
(Name of Firm/Company)
71-6th St (Address)
Shalimar Florida 32579 (City/State and Zip Code)
For further information concerning this matter, please call:
Harienne N. Carr at (850) 651-7924 (Name of Person) at (850) 651-7924 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Check # 3/07 Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 (Area Code & Daytime Telephone Number) Check # 3/07 Ch



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 28, 2005

ADRIENNE CARR 71-6TH STREET SHALIMAR, FL 32579

SUBJECT: FAR PROPERTY MANAGEMENT COMPANY, LLC

Ref. Number: M04000001733

We have received your document for FAR PROPERTY MANAGEMENT COMPANY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline Document Specialist

2005 NAY -9 PM 1

Letter Number: 205A00029690

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, MRIENDE N. CARR, hereby resign as Manager (Title)

of FAR Property Management Company, 22C

(Limited Eiability Company)

a limited liability company organized under the laws of the State of Newada

and affirm that the limited liability company has been notified in writing of the resignation.

(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314