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## GOODLETTE, COLEMAN, JOHNSON, YOVANOVICH & KOESTER, P.A. ATTORNEYS AT LAW

Kevin G. Coleman J. Dudley Goodlette Kenneth R. Johnson Richard D. Yovanovich Edmond E. Koester Northern Trust Bank Building 4001 Tamiami Trail North, Suite 300 Naples, FL 34103 (239) 435-3535 (239) 435-1218 Facsimile Linda C. Brinkman Gregory L. Urbancic William M. Burke Craig D. Grider Matthew L. Grabinski Matthew M. Jackson Alex R. Figares Jeffrey J. Beihoff E. James Kurnik, II Todd M. Rich

Writer's E-Mail: MMaybin@gcjlaw.com

September 5, 2008

## **VIA FEDERAL EXPRESS**

Amendment Section
Divisions of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re:

Riviera - Homes for America Holdings, LLC

Project Number: L04000087415

To Whom It May Concern:

The enclosed Resignation of Registered Agent for a Limited Liability Company is being submitted for filing along with the required fee of \$85.00, payable to the Florida Department of State.

Please return all correspondence concerning this matter to the following:

Melody L. Maybin Goodlette, Coleman, Johnson, Yovanovich & Koester, P.A. 4001 Tamiami Trail North, Suite 300 Naples, Florida 34103

For further information concerning this matter, please feel free to contact me at (239) 435-3535.

Very truly yours,

GOODLETTE, COLEMAN, JOHNSON.

YOVANOVICH & KOESTER, P.A.

Melody L. Maybin

Paralegal for Keyin Q. Coleman. Esq.

/mlm

Enclosures as stated

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 608.416(2) or 608.509, Florida	a Statutes, the undersigned,	7
Kevin G. Cole	eman	, hereby resigns as	1
	(Name of Registered Agent)	, nereby resigns as	Ċ
Registered Agent for _	RIVIERA - HOMES FOR AMER	ICA HOLDINGS, LLC	١, ١, ١
	(Name of Limited Liability Company)		
L04000087415 (Document Num	ber, if known)	•	
A copy of this resignati	on was mailed to the above listed limited lia	bility company at its last known address.	
The agency is terminate	ed and the office discontinued on the 31st da	y after the date on which this statement is filed.	
	(Signature of Resigning A	Agent)	. <u>.</u>
If signing on behalf of a	an entity:		
	(Typed or Printed Name)		
	(Capacity)	<del></del>	

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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