

LOT 000055214

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (212) 431-5000  
Fax Number : (212) 431-1441

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT RESIGNATION  
9781 BAY HARBOR INVESTORS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 DEC -9 AM 8:21

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EXAMINER

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 9781 BAY HARBOR INVESTOR'S, LLC  
(Name of Limited Liability Company)

**DOCUMENT NUMBER:** L07000055214

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Stephanie Wright**

(Name of Person)

**Blumberg Excelsior Corporate Services, Inc.**

(Name of Firm/Company)

**62 White Street**

(Address)

**New York, NY 10013**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Stephanie Wright**

(Name of Person)

at ( 212 ) 431-5000 ext 552  
(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

FILED  
10 DEC -9 AM 8:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned, **BlumbergExcelsior Corporate Services, Inc.**, hereby resigns as

(Name of Registered Agent)

Registered Agent for **9781 BAY HARBOR INVESTOR'S, LLC**

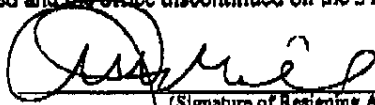
(Name of Limited Liability Company)

**L07000055214**

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

**Marc D. Moel**

(Typed or Printed Name)

**Asst. Secretary**

(Capacity)

**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 6317  
Tallahassee, FL 32314