

A06000000379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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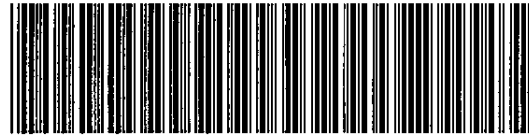
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: URBANA HOLDINGS LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A06000000379

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

ALEXANDER ANGUEIRA, ESQ.

Contact Person

Firm/Company

7301 SW 57TH COURT, SUITE 515

Address

SOUTH MIAMI, FLORIDA 33143

City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEXANDER ANGUEIRA

Name of Contact Person

at (305)

357-9000

Area Code and Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for:

☒ \$87.50 Filing Fee

☐ \$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**RESIGNATION OF REGISTERED AGENT
FOR
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

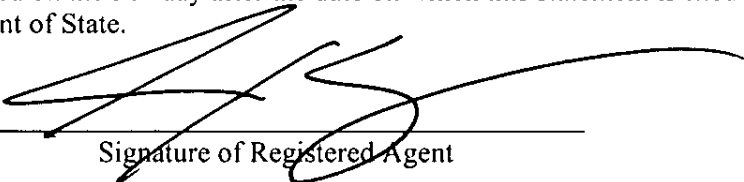
Pursuant to the provisions of section 620.1116, Florida Statutes, the undersigned,

ALEXANDER ANGUEIRA, hereby resigns as
Name of Registered Agent

Registered Agent for URBANA HOLDINGS LLLP,
Name of Limited Partnership or Limited Liability Limited Partnership

A06000000379
Florida Document Number, if known

The agent is terminated on the 31st day after the date on which this statement is filed by the Florida Department of State.


Signature of Registered Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$87.50
Certified Copy (optional): \$52.50