

LD0000003547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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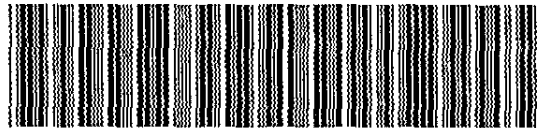
(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 23, 2004

JAMES VOGEL
3936 TAMiami TRAIL NORTH, SUITE B
NAPLES, FL 34103

SUBJECT: SANDPIPER GULF RESORT II, LLC
Ref. Number: L00000003547

We have received your document for SANDPIPER GULF RESORT II, LLC and your check(s) totaling \$350.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 904A00041501

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,

JAMES D. VOGEL

, hereby resigns as

(Name of Registered Agent)

Registered Agent for SANDPIPER GULF RESORT II, LLC

(Name of Limited Liability Company)

L00000003547

(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:

(Typed or Printed Name)

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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