L00000009243

Division of Corporations

Florida Department of State
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REGISTERED AGENT RESIGNATION

OMEGA PARTNERS, LLC

Certificate of Status	0
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RA Resign.
9-4-09

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Omega Partners, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L00000009243

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:

Piero L. Desiderio, Esq.
Name of Person

Steams Weaver Miller Weissler, et al.
Name of Firm/Company

200 East Las Olas Blvd., Suite 2100
Address

Fort Lauderdale, Florida 33301
City/State and Zip Code

pdesiderio@steamsweaver.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Piero L. Desiderio at (954) 462-9540
Name of Person 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$85.00 for an active limited liability company or $25.00 for an *administratively dissolved, voluntarily dissolved* or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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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,

American Information Services, Inc., hereby resigns as
Name of Registered Agent

Registered Agent for Omega Partners, LLC, a Florida limited liability company
Name of Limited Liability Company

L00000009243
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.

AMERICAN INFORMATION SERVICES, INC., Registered Agent
By: Marshall R. Burack
Signature of Resigning Agent

If signing on behalf of an entity:

Marshall R. Burack, Esq.
Typed or Printed Name

President
Capacity

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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

INHS17 (08/05)

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