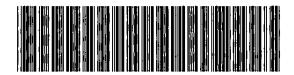
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CR28079 (5/06)

COVER LETTER

| TO: Registration Section Division of Corporations | | <i>`</i> | `. |
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| SUBJECT: R + A Title | | , | ' |
| (Name of Limited | iability Company) | / | |
| The enclosed member, managing member or ma | Jacet'theignation on | d fee(s) are subr | nitted for |
| filing. | Tagot Toolghanon an | | \ |
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| , Please return all correspondence concerning this | matter to: | | * |
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| Ruth Palmicki | i = i | | į |
| Ruth Praimieri (Coniad Person) | 7 (1 | | • |
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| Kelley Roark PA | | Lett | ,, <u> </u> |
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| For further information concerning this matter, p | lease call: | · SSE | - T |
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| Kelley Roark | 305 498- | - 8861 <u>7</u> 7 | T O |
| (Name of Contact Person) at | (Area Code & Daytim | e Telephone Num | iber) |
| | i i | O ni | - 0 |
| Enclosed please find a check made payable to th | e Flor <u>ida Departme</u>) | nt of State for: | |
| \$25 Filing Fee | \$55 Filing | | |
| | (Certifi | ed Copy | |
| STREET/COURIER ADDRESS: | MATTE | NG ADDRESS: | |
| Registration Section | l 1 | tion Section | |
| Division of Corporations | | of Corporations | i. |
| Clifton Building | P.O. Box | | |
| 2661 Executive Center Circle | | see, Florida 323 | 14 |
| Tallahassee, Florida 32301 | 1 | • | |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| 1. The name of the | limited liability compan | y as it appears on the records | s of the Florida Depar | tment |
|--|--|---------------------------------------|-------------------------|---------|
| of State is: | R& A Titl | e Services, LL | C | |
| | | · · · · · · · · · · · · · · · · · · · | 711V. 23SC 1007 | |
| | ility company was organ | ized under the laws of: | DEC RETI AHA | 1) |
| Florida | | | ARY SSE | 9 |
| | • | | m√ C | កា |
| 3. The Florida doc | ument/registration numb | er of this limited liability con | npany is: S S S S S S S | O |
| | 000001058 | | | |
| 4. I, <u>Roth</u> | A. Polmieri | hereby resign as a | MVP | |
| | · · | | | |
| of this limited lia resignation in wr | | n the limited liability compar | ny has been notified | of my |
| feel | Pl | | | |
| Signature of Res | igning Member, Managir | ng Member or Manager | | |
| | | | | |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | , , , , , , , , , , , , , , , , , , , | | |
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