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SECRETARY OF STATE ONS DIVISION OF CORPORATIONS



Mailing A: ress: P.O. Box 49948, Sarasota, Fl. 34230-6948

240 South Pineapple Avenue Sarasota, FL 34236 TEL 941-366-6660 FAX 941-366-3999

WWW,ABELBAND,COM

Jack M. Maag, Paralegal
Writer's Direct Line: (941) 364-2728
Direct E-mail: jmaag@abelband.com

Please refer to our file number: 12611-1

October 20, 2008

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Dream Island, LLC

Grand Mariner on Longboat Key Condominium Association, Inc.

To Whom It May Concern:

Enclosed please find an original Resignation of Registered Agent for the referenced entities, together with a check in the amount of \$172.50 to cover the filing fees.

Please return a date stamped copy of the filings to the undersigned in the enclosed envelope.

Very truly yours,

ABEL BAND, CHARTERED

JMM

Enclosures

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Kathryn A. Carr	, hereby resigns as
(Name of Registered Agent)	, hereby resigns as
Registered Agent for Dream Island, LLC	Florida Statutes, the undersigned, , hereby resigns as
	ي
(Name of Limited Liability Co.	inpany)
L02000012436	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed lim.  The agency is terminated and the office discontinued on the 3	
If signing on behalf of an entity:	_
	_
If signing on behalf of an entity:  (Typed or Printed N	signing Agent)

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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