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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to F | iling Officer | | | |
| Special instructions to r | ang Onicer. | | | |
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Office Use Only



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T. HAMPTON

SEP 1 7 2010

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| 2. Thorein of Corporations | |
| SUBJECT: PORTICOS 3837 LLĊ | |
| (Name of Limite | d Liability Company) |
| The enclosed member, managing member or m filing. | nanager resignation and fee(s) are submitted for |
| Please return all correspondence concerning th | is matter to: |
| ANDREW GAINES | |
| (Contact Person) | |
| PORTICOS 3837 LLC | |
| (Firm/Company) | |
| 3837 NW BOCA RATON BLVD | |
| (Address) | |
| BOCA RATON, FL 33431 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, | please call: |
| PATRICK GAINES | _{.t.(} 561 ₎ 989-0077 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to | the Florida Department of State for: |
| \$25 Filing Fee | \$55 Filing Fee & |
| - | Certified Copy |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| Clifton Building | P.O. Box 6327 |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 |
| Tallahassee, Florida 32301 | |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| | nited liability company as TICOS 3837 LLC | it appears on the records | s of the Florida De | partm | ent |
|-----------------------------------|--|----------------------------|-----------------------|-----------|-----------------------------|
| 2. This limited liability FLORIDA | ty company was organized | under the laws of: | | | |
| 3. The Florida docum | ent/registration number of | this limited liability cor | npany is: | | |
| 4. I, MITCHELL | K SMITH e of Person Resigning) | , hereby resign as a | MANAGER (Print Title) | | _ |
| • | ity company and affirm the | e limited liability compa | , | ed of 1 | my |
| Au Signature of Region | topul | Combon on Managon | | | |
| | ing Member, Managing M \$25.00 (Required) \$30.00 (Optional) | ember or Manager | | 10 SEP 16 | SECRETARY DIVISION OF CO |
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