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SECRETARY OF STATE

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## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: 100H GOOR PTRS, LhC (Name of Limited Liability Company)					
Dear Sir or Madam:					
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing					
Please return all correspondence concerning this matter to the following:					
DIETER A. THIEMANN (Name of Person)					
D.A. THIEMANN CAA PA (Firm/Company)					
11380 PROSPERITY FARMS RD 215 (Address)					
PALM DEACH GARDENS FL 33410 (City/State and Zip Code)					
For further information concerning this matter, please call:					
D. THIEMANN at (561) 694-1200					
(Name of Person) (Area Code & Daytime Telephone Number)					
STREET/GOURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:					
CR2E079 (8/05)  \$55 Filing Fee &  Certified Copy					



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

### RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, <u></u>	IETER	A. THIE	MANN,	hereby resign a	s MANAGER	
of	1BBH	GDBR	PTRS.	LLC	(Tille)	
of 1334 GOBR PTRS LLC (Limited Liability Company)						
a limite	ed liability con	npany organized	under the laws	of the State of	FLORIDA	
and affirm that the limited liability company has been notified in writing of the resignation.						
		Jutar A			or member)	

#### FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CR2E079 (8/05)

SECRETARY OF STATE

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