10300004523

(Day to Ja Nama)	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
103-4523	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
1/23 RJA Res.	
123 FIA RW	
- Martine I	

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: R & R PROPERTY N	MANAGEMENT, LLC				
(N	lame of Limited Liability Company)	•			
DOCUMENT NUMBER: L03000	00004523				
The enclosed Resignation of Register for filing.	red Agent for a Limited Liability Company and fee are s	ubmitted			
Please return all correspondence conc	cerning this matter to the following:				
Brenda Carter					
(Name of Person	<u> </u>				
National Corporate Research, Ltd					
(Name of Firm/Com	npany)				
615 South DuPont Highway					
(Address)	. =				
Dover, DE 19901					
(City/State and Zip	(City/State and Zip Code)				
For further information concerning th	his matter, please call:				
Brenda Carter	at (800) 483-1140 (Area Code & Daytime Telephone Number)				
(Name of Person)	(Area Code & Daytime Telephone Number)	• • • • • • • • • • • • • • • • • • • •			
Enclosed is a check made payable to liability company or \$25,00 for an adliability company.	the Florida Department of State for \$85.00 for an active lministratively dissolved, voluntarily dissolved or withdo	limited awn limited			
Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 608.416(2) or 608.509, Florida S	statutes, the undersigned,
National Corporate Research, Ltd.		, hereby resigns as
	(Name of Registered Agent)	
Registered Agent for	R & R PROPERTY MANAGEMENT, I	LLC
	(Name of Limited Liability Company)	
L030000004523		
(Document Nun	ber, if known)	
	on was mailed to the above listed limited liabil d and the office discontinued on the 31st day a way to be a supply the supply the supply that the supply the supply that the supply that the supply the supply that the supply	
If signing on behalf of a	n entity:	7.00 0.
	Wayne Rafanelli	L AN
	(Typed or Printed Name)	JAN 23
	Vice President	٠,
	(Capacity)	
_		1: 24 1: 24

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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