10300005545

| (Requestor's Name) | |
|---|---|
| (Address) | |
| (Address) | |
| | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| (2000) | |
| Certified Copies Certificates of Status | _ |
| Special Instructions to Filing Officer: | |
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Office Use Only



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SECRETARY OF STATE

COVER LETTER

| TO: | Registration Section Division of Corporations | |
|---|---|---|
| SUBJ | ECT: The Palm Townhomes, (Name of Limite | LLC. ed Liability Company) |
| The er filing. | | nanager resignation and fee(s) are submitted for |
| Please | return all correspondence concerning th | nis matter to: |
| Ma | nuel J. Mari (Contact Person) | |
| <u>Ma</u> | nuel J. Mari, P.A. (Firm/Company) | |
| <u>250</u> | Bird Road, Suite 200 (Address) | |
| Cor | al Gables, Florida 33146 (City/State and Zip Code) | |
| For fu | rther information concerning this matter | , please call: |
| Ma | nuel Mari (Name of Contact Person) | at (305) 444-9100 (Area Code & Daytime Telephone Number) |
| Enclos | sed please find a check made payable to X \$25 Filing Fee | the Florida Department of State for: \$55 Filing Fee & Certified Copy |
| Regist Division Cliftor 2661 E | cet/Courier Address: cration Section on of Corporations n Building Executive Center Circle assee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |

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 company as i | it appears on the records of the Florida D | epartment |
|-----------------------|---------------------------------------|--|------------|
| of State is: | The Palm Townhom | nes, LLC. | • |
| | | | |
| 2. This limited liabi | lity company was organized | under the laws of: | |
| Florida | · · · · · · · · · · · · · · · · · · · | · | |
| | | | |
| 3. The Florida docu | ment/registration number of | this limited liability company is: | |
| L0300000 | 5545 | . | |
| | | | |
| 4. I, Arnaldo E |)iaz | , hereby resign as a Managing Me | |
| | nme of Person Resigning) | (Print Title | , |
| | | limited liability company has been notif | fied of my |
| resignation in write | ting. | | |
| f the | | | |
| X Trans | melli- | | |
| Signature of Resig | gning/Member, Managing M | ember or Manager | |
| | 11 | | |
| | • | | |
| Filing Fee: | · • | | |
| Certified Copy: | \$30.00 (Optional) | | |

CR2E079 (5/06)

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