

LABORATORY

(Specimen ID #)

(Accession #)

(Accession #)

(City/State/Zip/Phone #)

TELETYPE WALK MAIL

(Signature of Entry Operator)

(Department/Division)

Certified Copies

Certificate of Value

Special instructions to Laboratory



400113131094

LABORATORY
STATE OF CALIFORNIA

12/14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Property Development Partners of Tampa Bay, LLC
(Name of Limited Liability Company)

The enclosed members, managing member or manager resignation and fees are submitted for filing.

Please return all correspondence concerning this matter to:

CHRISTOPHER M. BOHMEY
(Name of Contact Person)

101 N ROCKY POINT DR, SUITE 200
(Address)

Tampa, FL 33600-1
(City, State and Zip Code)

For further information concerning this matter, please call:

CHRIS BOHMEY
(Name of Contact Person)

813 (Area Code) (600) 4141 x101
(Area Code & District Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
 \$25 Filing Fee \$55 Filing Fee & Certified Copy

STATE/COURIER ADDRESS:
Registration Section
Division of Corporations
Citron Building
2661 Executive Center Circle
Tallahassee, Florida 32304
CP 0102000

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314





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 it appears on the records of the Florida Department of State is: Property Development Partners of Tampa Bay LLC

2. This limited liability company was organized under the laws of: Florida

3. The Florida document/registration number of this limited liability company is: LC2008001216

4. Robert M. Miller (Print Name of Person Resigning) hereby resigns as a MEMBER (Print Title) of this limited liability company and certifies the limited liability company has been notified of my resignation in writing.

Robert M. Miller
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
MAR 10 2009
TAMPA
FLORIDA