

W3 000021830

CFRA LLC
(Requestor's Name)

P.O. BOX 3239
(Address)

(Address)

Tampa, FL 33601
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

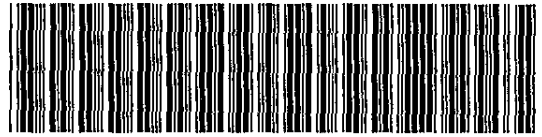
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
2/3 - RFA Resign

L03-21830

Office Use Only



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MJH

03/03/05--01034--012 **255.00

FILED
05 MAR -3 PM 4:45
TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

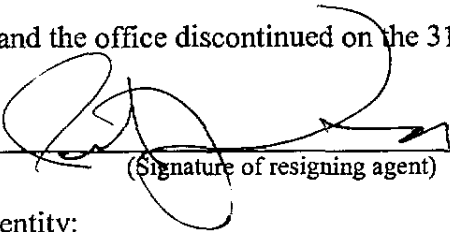
Pursuant to the provisions of sections 608.416(2) or 608.509, Florida Statutes, the undersigned,

_____ hereby resigns as
CFRA, LLC
(Name of registered agent)

Registered Agent for _____
4960 SW 136TH AVENUE, LLC
(Name of Limited Liability Company)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of resigning agent)

If signing on behalf of an entity:

Peter J. Winders

(Typed or Printed Name)

Vice President

(Capacity)

FILING FEES:

\$85.00 Active corporation
\$25.00 Administratively dissolved corporation

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

INHS17(10/99)

TALLAHASSEE, FLORIDA
05 MAR -3 PM 4:45
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