

L03000030699

(Requestor's Name)

(Address)

(Address)

15 07-14 1054 4

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

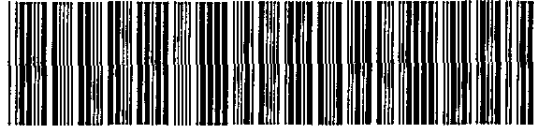
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 JUN -8 PM 4:49

FILED

RA. Resign
G. O'Connell JUN 10 2004

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

01 JUN -8 PM 12:35

RECEIVED



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 727635 4336896

AUTHORIZATION :

Patricia P. [Signature]

COST LIMIT : \$ 85.00

ORDER DATE : June 8, 2004

ORDER TIME : 11:05 AM

ORDER NO. : 727635-025

CUSTOMER NO: 4336896

CUSTOMER: Ms. Amy E. Schultz
Thaler & Thaler, P.a.
700 North Olive Avenue

West Palm Beach, FL 33401

REGISTERED AGENT RESIGNATION

NAME: HL CRUISING, LLC

XX REGISTERED AGENT RESIGNATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan-EXT#2955

EXAMINER'S INITIALS: _____

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

PAUL E. GHOUGASIAN

, hereby resigns as

(Name of Registered Agent)

Registered Agent for HL CRUISING, LLC

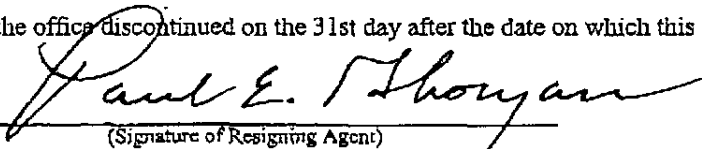
(Name of Limited Liability Company)

L03000030699

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company 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:

(Typed or Printed Name)

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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- \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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