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(Re	questor's Name)	•			
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PICK-UP	WAIT	MAIL			
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Certified Copies	_ Certificates	of Status			
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SEVENTARY OF STATE
TAIL AHASSEE, FLORIDA

B. BOSTICK

SEP 1 4 2012

EXAMINED



September 7, 2012

RE: N.R.L.L. EAST, LLC (FL. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is _____ check in the amount of \$85.00__ to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-addressed envelope.

Very truly yours,

NRAI SERVICES, INC.

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary (212)894-8516

TA/hm Enclosure 12 SEP 13 PM 2: 38

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 608.416(2) or 608.509, Florida Stat	utes, the undersigned,			
NRAI SERVICES, INC.			, hereby resigns as			
. •	(Name of Registered Ages	nt)	,,			
Registered Agent forN	N.R.L.L. EAST, LLC	(FL. DOM.)				
•					_	
	(Name of Lim	nited Liability Company)				
L04000002	303					
(Document Nu	ımber, if known)					
A copy of this resigna	tion was mailed to the a	bove listed limited liability	company at its last kr	own add	ress.	
		ntinued on the 31st day afte				Slad
The agency is termina	ted and the office discor	nunued on the 31st day are	or the date on which th	is statem	ent is i	nea.
	· then	ature of Resigning Agent)	•			
	(Signa	ature of Resigning Agent)				
If signing on behalf of	an entity:					
	NRAI SERVICES,	INC Theresa Alfieri				
•		yped or Printed Name)				
	ASSIS	STANT SECRETARY				
		(Capacity)		₽ g		
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	•		•	数数	-0	encompanies of the second
	FILING	FEES:		100 King	သ	-
	\$ 85.00 \$ 25.00	Active limited liability of Administratively dissolve withdrawn limited liability	ompany yed/ voluntarily dissol	ved/h	PH	
		withdrawn limited liabi	ity company		$\ddot{\sim}$	Ü
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Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314