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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

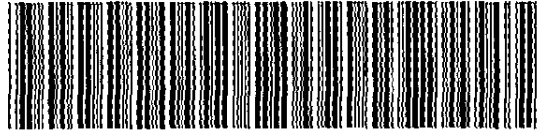
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2006 MAR 22 PM 2:02  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

J. BRYAN MAR 27 2006

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE PLACE VIA CLAMATIS, LLC.  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PEDRO F. VILLAR  
(Name of Person)

THE PLACE VIA CLEMATIS, LLC.  
(Firm/Company)

235 ALTARA AVE.  
(Address)

CORAL GABLES, FL 33146  
(City/State and Zip Code)

For further information concerning this matter, please call:

PEDRO F. VILLAR at ( 305 ) 461-2747  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER**

I, PEDRO F. VILLAR, hereby resign as MANAGER  
(Title)

of THE PLACE VIA CLEMATIS, LLC,  
(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA

and affirm that the limited liability company has been notified in writing of the resignation.

A handwritten signature in black ink, appearing to read "Pedro F. Villar", is written over a horizontal line.

(Signature of resigning manager, managing member or member)

**FILING FEE IS \$25.00**

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

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