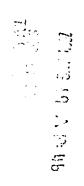


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only-Otation Eliph Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1 42 to 2 41 11 - 1 - 2 7
100 mm - 100
Office Use Only
A sufficiency of the sufficiency
W. P. 00 150 2500



08/19/04--01005--008 **190.00



TRANSMITTAL LETTER

SUBJECT: Port Offices, LLC	
(Name of Limited Liability Company)	
DOCUMENT NUMBER: L04000017058	
_	
Please return all correspondence concerning this matter to the following:	
Frank P. Crivello	
(Name of Person)	- 1000 man
Commercial Control of the Control of	
Port Offices, LLC	
(Name of Firm/Company)	
3408 Dover Road	19 A
(Address)	5
,	(<u>=</u>
Pompano Beach, FL 33062	O .
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Frank P. Crivello (Name of Person) at (954) 532-0240 (Area Code & Daytime Telephone)	

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, <u>William Darter</u>	, hereby resign as	Managing Mo	ember_
	_	(Title)	
of Port Offices, LLC		ja naj	
(Limited Liability	Company)		
a limited liability company organized under the laws	s of the State of	Florida ;	· · · · · · · · · · · · · · · · · · ·
and affirm that the limited liability company has bee	n notified in writin	ng of the recipration	e Sa on
and arrive mat the infinited hability company has bee		ing of the resignation	л.
Ki l		. \$	أمور
	who -	٩٠٠	
(Signature of resigning manager, m	anaging member o	or member)	
	GM		

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