Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000077174 3)))



H160000771743ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

from:

Account Name : NASON, YEAGER, GERSON, WHIVE & LICCE, F.A.

Account Number : 073222003555 Phono : (561)686-3307 Fax Number : (561)290-1590

Enter the email address for this business entity to be used for future annual report Moilings. Enter only one email address please.

Ensil March @ Mason yeager CON

LLC REGISTERED AGENT RESIGNATION VERO HOTEL MANAGEMENT, LLC

Certificate of Status	1
Certified Copy	O O
Page Count	01
listimated Charge	\$90,00

Electronic Filing Menu

Corporate Filing Menu

Heip

2016 MAR 28 P 2: 1

MIGHAR 28 PH 3: 07

HAM S & SOME

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 605.0113	5, Florida Statutes, the un	dersigned,		
Alan I. Armour II			, hereby resigns as		
	Nume of Registered Agent		_ (1.0.00) 1.008.10.00		
Registered Agent for Ve	ero Hotel Manage	ement, LLC			
	Name of Lim	ited Liability Company			
L04000083654					
Document Nut	mber, if known				
A copy of this resignatio	n was mailed to the a	above listed limited liabili	ty company at its la	st known ac	ddress.
The agency is terminated	1	Signature of Resigning Ager		ch this state	ment is filed.
	T	yped or Printed Name	***************************************		
	``	Capacity		JA:	~3 .
	FILING \$ 85.00 \$ 25.00 Make checks payal	Active limited liability Administratively disso withdrawn limited liab ble to Florida Department	bility company of State and mail to:	RETWISE SELSTATE ALLASSIES FLORID	
		Division of Corporations P.O. Box 6327			.

Tallahassee, FL 32314