

L05000018721

(Requestor's Name)

Silver & Silver
Attorneys at Law
2nd Floor
108 South Miami Avenue
Miami, FL 33130

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

05 MAY 13 AM 9:23

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KAS
* Copy 1



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 5, 2005

SILVER & SILVER, ATTORNEYS AT LAW
2ND FLOOR
108 SOUTH MIAMI AVENUE
MIAMI, FL 33130

Ref. Number: LO5000018721

We have received your document for and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist

Letter Number: 405A00032348

RECEIVED
05 MAY 13 AM 9:45
DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LCNR Ventures LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L05000018721

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ira S. Silver

(Name of Person)

Silver & Silver Attorneys

(Name of Firm/Company)

108 S. Miami Avenue Floor 2

(Address)

Miami, Florida 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

Ira S. Silver, Esq.

(Name of Person)

at (305) 374-4788

(Area Code & Daytime Telephone Number)

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Ray Shoua, hereby resigns as
(Name of Registered Agent)

Registered Agent for L.C.N.R. VENTURES, L.L.C.

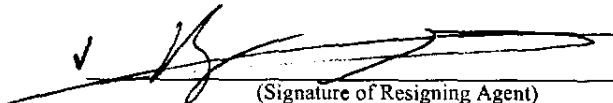
(Name of Limited Liability Company)

L05000018721

(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)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA