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| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
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| (Business Entity Name) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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2000 NOV 21 AM 10: 32 SECRETARY OF STATE

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EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | | | | |
|--|----------------------|--|---|--|
| SUBJECT: LMDMH, LLC | | | | |
| (Name of | Limited Liability Co | ompany) | | |
| The enclosed member, managing membe filing. | er or manager res | ignation and fee(s) are s | ubmitted for | |
| Please return all correspondence concern | ning this matter to |): | | |
| Laurie Generalli, Esq. | | | | |
| (Contact Person) | | _ | | |
| Bratter Krieger Law Group, LL | .P | | | |
| (Firm/Company) | | _ | | |
| 500 South Pointe Drive, Suite | 230 | <u> </u> | | |
| (Address) | | | ZODO FALI | |
| Miami Beach, Florida 33139 | | | NOV CRET | COLUMN TO SERVICE |
| (City/State and Zip Code) | | _ | 21 ARY SSE | THE REAL PROPERTY AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AN |
| For further information concerning this r | natter, please cal | 1: | 2000 NOV 21 AM 10: 32 SECRETARY OF STATE TALLAHASSEE.FLORID | |
| Laurie Generalli | at (305 | <u>674-8472</u> | | |
| (Name of Contact Person) | ·(Area Coo | de & Daytime Telephone N | Jumber) | |
| Enclosed please find a check made payal \$25 Filing Fee | ble to the Florida | Department of State for \$55 Filing Fee & Certified Copy | : | |
| STREET/COURIER ADDRESS: | | MAILING ADDRES | SS: | |
| Registration Section | | Registration Section | | |
| Division of Corporations | | Division of Corporati | ons | |
| Clifton Building | | P.O. Box 6327 | 22214 | |
| 2661 Executive Center Circle Tallahassee, Florida 32301 | | Tallahassee, Florida 3 | 12317 | |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| 1. The name of the lin of State is: LMD | mited liability company as it ap | pears on the records | of the Florida | Department | |
|--|----------------------------------|----------------------|----------------|------------|------------|
| 2. This limited liabili Florida | ty company was organized und | er the laws of: | | | |
| L050000206 | | | | 2008 NOV 2 | 43045 5335 |
| _{4. I,} Joshua Brat | ter | , hereby resign as a | Managing | Member | |
| | | | (Print Tit | HIOTS2 | O |
| Signature of Resign | ning Member, Managing Memb | er or Manager | | | |
| Filing Fee: | \$25.00 (Required) | | | | |
| Certified Copy: | \$30.00 (Optional) | | | | |