## L05000083096

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



800108132618

08/17/07--01012--027 \*\*25.00

DIVISION OF CORPORATIONS

OT AUG 17 AH 11: 56

## **COVER LETTER**

Division of Corporations	
SUBJECT: Poupo co Poi	ability Company)
The enclosed member, managing member or mana filing.	ger resignation and fee(s) are submitted for
Please return all correspondence concerning this m	natter to:
Robert M Grants (Contact Person)	OT AUG 17 AM II: 56
(Firm/Company)	
33 Water ST	- - - -
ST Augustine Pl (City/State and Zip Code)	32084
For further information concerning this matter, ple	ase call:
Robert Granbard at ( (Name of Contact Person) (A	194 226-1708 Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for:  \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



## 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 of State is:	limited liability company as it appears on the records of the Florida Department  Poupoise Point Developeant Gray La
2. This limited liabi	lity company was organized under the laws of:
	ment/registration number of this limited liability company is:
	th Granband, hereby resign as a Mang 7 Much ame of Person Resigning) (Productile)
of this limited liab resignation in wri	tility company and affirm the limited liability company has been notified of my ting.
Signature of Resignature	gning Member, Managing Member or Manager
Filing Fee: Certified Copy:	