## L050000 89419

•			
(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



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03/24/10--01034--016 \*\*345.00



Plewis 76-10 3-26-10

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of sec	tion 608.416(2) or 608.509, Florida St	tatutes, the undersigned,	
CFRA, LLC	•	, hereby resigns as	
(Name of Registered Agent)		· · · · · · · · · · · · · · · · · · ·	
Registered Agent for Costa	Blanca III Real Estate LL	C 最重 三	
<i>9</i> 4	(Name of Limited Liability Company)	SER D	
L05000089419		FLOR	
(Document Number, if know	vn)	EK C	
A copy of this resignation was tr	nailed to the above listed limited liabili	ity company at its last known address.	
The agency is terminated and the	e office discontinued on the 31st day as	fler the date on which this statement is filed.	
	Type Butiles		
7	(Signature of Resigning Ager	nt)	
If signing on behalf of an entity.			
Joyce Joyce	e F. Bentubo		
	(Typed or Printed Name)		
Secr	etary	,	
A Company of the Comp	(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withdrawn limited liability company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