

LD5000090177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

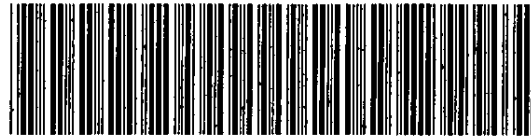
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JUL - 7 2008

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08 JUL -3 AM 10:38

SECRETARY OF STATE
TALLAHASSEE FLORIDA

LEFKOWITZ, SHAW & SENTNER

ATTORNEYS AND COUNSELORS AT LAW

IVAN M. LEFKOWITZ*
THOMAS C. SHAW**
KEVIN A. SENTNER**

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WEBSITE: ORLANDOLAW.ORG

* BOARD CERTIFIED IN TAXATION AND
* MASTER OF LAWS IN ESTATE PLANNING
** BOARD CERTIFIED IN WILLS, TRUSTS, ESTATES

July 1, 2008

Attn: Corporations Division
Secretary of State
Bureau of Corporate Records
Post Office Box 6327
Tallahassee, Florida 32314

Re: Miocorp Management, L.L.C.
Document No. L05000090177

Dear Sir or Madam:

Enclosed please find a Resignation of Registered Agent for a Limited Liability Company. Please process this request and return a copy of our office.

A check is also enclosed in the amount of \$25.00 to cover the filing fee for this service.

If there are any questions concerning the above, please feel free to call me.

Yours very truly,


Ivan M. Lefkowitz

IML:glg
Enclosures
cc: Alex Miotti, Manager

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,

IVAN M. LEEKOWITZ, hereby resigns as
(Name of Registered Agent)

Registered Agent for MIOCORP MANAGEMENT, L.L.C.

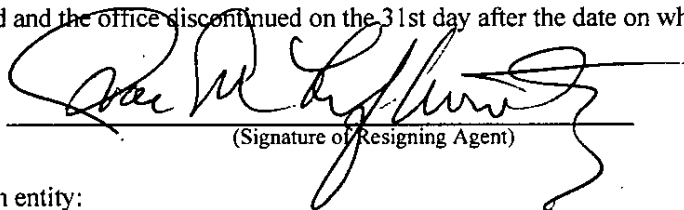
(Name of Limited Liability Company)

L05000090177

(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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TALLAHASSEE FLORIDA