205000120303

(Re	questor's Name)	··· · · · · · · ·
(Ad	dress)	
. (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
. (Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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2008 AFR -3 PH 1: 08
SECRETARY OF STATE

R.A. Resignation

TB 4-8-08



March 31, 2008

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Aslan Portico Investments, LLC

Dear Filing Officer:

Enclosed please find a Resignation of Registered Agent filing form for the above referenced name, which is to be filed in your office at your earliest convenience. Enclosed is check # 14317 in the amount of \$85.00 for the filing fee. Once filed, please return the filed-stamped copy in the self-addressed envelope. If you have any questions please contact the undersigned at (800) 345-4647.

Sincerely,

Khonda Maybin
Rhonda Maybin

Enclosures

COVER LETTER

SUBJECT:	Aslan Po		Investm ted Liabili			
DOCUMENT NUM	1BER: <u>L0500012030</u>	3				-
The enclosed Resign for filing.	nation of Registered A	gent fo	or a Limit	ed Liabil	ity Company	and fee are submitted
Please return all cor	respondence concernir	ng this	matter to	the follo	wing:	
	Rhonda Maybin (Name of Person)			_		
Capito (1	Corporate Services, Name of Firm/Company)	Inc.		_		
80	00 Brazos, Suite 400 (Address)		_	_		
A	ustin, Texas 78701 City/State and Zip Code)			·		
For further informat	ion concerning this ma	atter, p	lease call	:		
	da Maybin ne of Person)	at (800 (Arca Co	_) de & Day	345-4647 time Telephon	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO:

Amendment Section Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Return acknowledgment to: 2 M Capitol Corporate Services, Inc. P.O. Box 1831 Austin, TX 78767

800/345-4647

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of se	ction 608.416(2) or 608.509, Fl	lorida Statutes, the undersigned,	PER SUM
Capitol Corporate Services, Inc.		, hereby resigns as	100 PM
(Name	of Registered Agent)		7.0
Registered Agent for	Aslan Portico	Investments, LLC	
			<u> </u>
	(Name of Limited Liability Comp	pany)	, ·
L05000120303			
(Document Number, if kno	wn)		
A copy of this resignation was i	nailed to the above listed limite	ed liability company at its last know	vn address.
The agency is terminated and th	e office discontinued on the 31	st day after the date on which this	statement is filed.
	Chlessia (Signature of Resig	ning Agent)	
If signing on behalf of an entity	:		
	Cheryl Roberts	S	
	(Typed or Printed Nan	ne)	
	President		
	(Capacity)		

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314