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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO:

TO: Registration Section Division of Corporations		
SUBJECT: Dolphin Properties, LLC		
(Name of Limi	ted Liability Com	pany)
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing	Member or Ma	nnager and fee(s) are submitted for filing
Please return all correspondence concerning this r	natter to the fo	llowing:
Walter S. Just Jr.		_
(Name of Person)		
Legacy Holdings of Florida, LLC		
(Firm/Company)		_
4250 Alafaya Trail Suite 212-346		=
(Address)		_
Oviodo El 22765		
Oviedo, FL 32765 (City/State and Zip Code)		<u> </u>
For further information concerning this matter, plants	ease call:	
Walter S. Just	at (_407	701-8463
(Name of Person)		& Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	 ✓S	355 Filing Fee &
CR2F079 (8/05)		Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Michelle Tolentino	, hereby resign as managing member
	(Title)
of Dolphin Properties , UC	
(Limited	d Liability Company)
a limited liability company organized under	the laws of the State of Florida
and affirm that the limited liability company	has been notified in writing of the resignation.
MAflet	
(Signature of resigning man	nager, managing member or member)

FILING FEE IS \$25.00

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

DIVISION OF CORPORATION