## L06000071140

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, <b>(</b> Ac	, (Address)				
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SECRETARY OF STATE
OF LORIDA

aC.

## **COVER LETTER**

TO: Registration Section	
Division of Corporations	
SUBJECT: TP-4402, LLC (Name of Limite)	d Liability Company)
•	
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
Eric J. Grabois	
(Contact Person)	<u></u>
Eric J. Grabois, P.L.	
(Firm/Company)	
11900 Biscayne Blvd. Ste. 61	6
(Address)	
North Miami, FL 33181	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Eric J. Grabois	at (305) 893-8003
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	the Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)



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SECRETARY UF STATE
TALLAHASSEE, FLORIDA

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as i -4402, LLC	t appears on the record	s of the Florida Department
	ility company was organized t	ander the laws of:	
3. The Florida docu <u>L060000</u>	nment/registration number of t	this limited liability con	mpany is:
4. I, Adam R.	Schiffman, Esq.	, hereby resign as a	Manager (Print Title)
of this limited lial resignation in wr	pility company and affirm the	limited liability compa	any has been notified of my
Signature of Resi	gning Member, Managing Me	ember or Manager	
	\$25.00 (Required) \$30.00 (Optional)		