L0000072988

| | , | |
|---------------------------|-------------------|-----------|
| (Re | questor's Name) | |
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zin/Dhone | . #0 |
| (City/State/Zip/Phone #) | | |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to I | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



300217373553

01/11/12--01010--017 **50.00

12 JAN II AM II: 29
SEURE TARY OF STATE
TALL AHASSEE, FI DEID

D. BRUCE
JAN 1 2 2012
EXAMINER

COVER LETTER

| Division of Corporations | | |
|--|---|--|
| SUBJECT: Building 101 D, LLC (Name of Limited) | Liability Company) | |
| The enclosed member, managing member or ma | | |
| Please return all correspondence concerning this | s matter to: | |
| Contact Person) | | |
| (Contact Person) | | |
| Bulding 101 D LLC (Firm/Company) | 12 J | |
| | | |
| 3066 TAMINMI TR N # 20 (Address) | | |
| (Address) | | |
| NAPLES FI 34103 (City/State and Zip Code) | 12 JAN II AM II: 29 ALLAHASSEE, FLORIDA | |
| (City/State and Zip Code) | | |
| For further information concerning this matter, | please call: | |
| (Name of Contact Person) at | (716)753-6124 | |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) | |
| Enclosed please\find a check made payable to the | | |
| \$25 Filing Fee | S55 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 | |

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| | e limited liability company as | s it appears on the records of the Florida Department |
|--|--|---|
| 2. This limited liab | oility company was organized | d under the laws of: |
| | ument/registration number o | f this limited liability company is: |
| 4. I, <u>PETER</u> (Print N | Iame of Person Resigning) | , hereby resign as a MANAGING MEMBER (Print Title) |
| of this limited lia resignation in wr | | ne limited liability company has been notified of my |
| Signature of Res | bying Member, Managing N | Member or Manager |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | 12 JAN I. |