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SECRETARY OF STATE

C. LEWIS

JUN 12009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 1400 Prox Long (Name of Limited	Liability Company)
The enclosed member, managing member or ma filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
Elvis J SALVADO (Contact Person)	<u> </u>
	<u></u>
(Firm/Company)	
8244 NW 107 PATH (Address)	\$ 9
Qual F(33/78 (City/State and Zip Code)	
For further information concerning this matter,	please call:
(Name of Contact Person) at	(305) 20587-76 (Area Code & Daytime Telephone Number)
Enclosed please, find a check made payable to the \$25 Filing Fee	ne Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FILED

2009 MAY 29 PM 2: 08

SECRETARY OF STATE TALLAHASSEE. FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: 1400 Bay LLC.
2. This limited liability company was organized under the laws of: Florid +
3. The Florida document/registration number of this limited liability company is: \(\begin{align*} \text{L 0700000 3483} \]
4. I, Diago Lovan 20, hereby resign as a MGRM (Print Name of Person Resigning) (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Signature of Resigning Member, Managing Member or Manager
Filing Fee: Certified Copy:

CR2E079 (5/06)