L07000021386

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
	·	
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	cument Number))
Certified Copies	_ Certificate:	s of Status
Consist Instructions As	Silina Officer	
Special Instructions to	Filing Officer:	
	,	
		i
		1
		İ

Office Use Only



600223100686

02/28/12--01003--007 **225.00

FILED

2012 FEB 27 M 8: 30

SECRETARY OF STATE

TALLAHASSEE

J. SAULSBERRY EXAMINER FEB **29** 2012

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HBY Coral Gables, LLC (Name of Limited Lie	ability Company)
The enclosed member, managing member or mana filing.	ger resignation and fee(s) are submitted for
Please return all correspondence concerning this m	natter to:
William Holly	
(Contact Person)	
(Firm/Company)	
c/o 1395 Brickell Avenue, Suite 700	Z
(Address)	DIZECR LLAI
Miami, FL 33131	2012 FEB 27 AM SECRETARY OF ALLAHASSEE, F
(City/State and Zip Code)	THE TENT OF THE TE
For further information concerning this matter, plea	ase call: CRIDA & CORD A
Juan Rodriguez, Esq. at (305) 372-7474 · □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the F \$25 Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
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

CR2E079 (5/06)



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 Y Coral Gables, LLC		s of the Florida Departmen	nt
2. This limited liab Florida	ility company was organized	d under the laws of:		
3. The Florida docu L07000021	ment/registration number o	f this limited liability con	npany is:	
of this limited lial	ame of Person Resigning) pility company and affirm th	, hereby resign as a	(Print Title)	y
resignation in wri	no m	(and an an Manager	ĨÃ. 2	
Filing Fee: Certified Copy:	gning Member, Managing N \$25.00 (Required) \$30.00 (Optional)	nember of Manager	2012 FEB 27 AM 8: 3 SECRETARY OF STATE ALLAHASSEE, FLORIC	