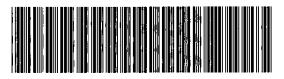
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(City	/State/Zip/Phone	e #)
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(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer	
Special instructions to r	iiiig Officer.	
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	DEC -7	2010
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Office Use Only



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12/06/10--01050--021 \*\*260.00

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of se	ection 608.416(2) or 608.50	99, Florida Statutes, the undersig	ıned,
C	FRA, LLC	, hereby resigns	as
Name	of Registered Agent		
Registered Agent for	SELECT HOTELS JBJ, LLC		
	Name of Limited Liability (	Company	<del></del> ,
L080000075	·		
Document Number, is	f known		
A copy of this resignation was	mailed to the above listed l	imited liability company at its la	ast known address.
The agency is terminated and t	Jorgan	Resigning Agent	ich this statement is filed.
If signing on behalf of an entity	y: (		Since of the same
	Joyce F Be		AM DE ST
	Secreta		₹ <b>15</b>
	Capacity		

## **FILING FEES:**

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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