

L080000010167

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*AS Rep
5/10/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Juniper Management (500 Brickell), LLC.
Name of Limited Liability Company

DOCUMENT NUMBER: L08000010167

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ernesto Sanchez, Esq.
Name of Person

Ernesto Sanchez, P.A.
Name of Firm/Company

1313 Ponce De Leon Blvd. Suite 301
Address

Coral Gables, FL. 33134
City/State and Zip Code

esanch@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ernesto Sanchez at (305) 441-2040
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Ernesto Sanchez, P.A.

Name of Registered Agent

, hereby resigns as

Registered Agent for Juniper Management (500 Brickell), LLC

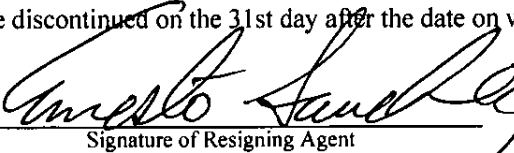
Name of Limited Liability Company

L08000010167

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

Ernesto Sanchez, Esq.

Typed or Printed Name

President

Capacity

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TALLAHASSEE, FLORIDA

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