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| PICK-UP WAIT MAIL | | | | |
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| Certified Copies: Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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S. HAWKES NOV 2 4 2009 EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Florida Spot, LLC | Liability Company) |
| The enclosed member, managing member or ma | |
| Please return all correspondence concerning this | s matter to: |
| Seth Z. Joseph | |
| (Contact Person) | |
| Florida Spot, LLC | |
| (Firm/Company) | |
| 255 Alhambra Circle, Suite 800 | |
| (Address) | ···· |
| Coral Gables, Florida 33134 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, p | please call: |
| Seth Z. Joseph | (305) 445-5383 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to th | 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 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

NOV. 5,2009

| | limited liability company as i | t appears on the records of | f the Florida Department |
|--|--------------------------------------|-----------------------------|--------------------------|
| 2. This limited liab | ility company was organized | under the laws of: | |
| 3. The Florida doc L0800001 | ument/registration number of 1621 | his limited liability compa | any is: |
| 4. I, Hassan Dahlawi | | , hereby resign as a N | fanager |
| (Print N | ame of Person Resigning) | | (Print Title) |
| of this limited lia resignation in wr | bility company and affirm the iting. | limited liability company | has been notified of my |
| 444 | 111 | | |
| Signature of Res. | gning Member, Managing Me | mber or Manager | |
| | \$25.00 (Required) | | |
| Certified Copy: | \$30.00 (Optional) | | |

CR2E079 (5/06)