

LU8 000036835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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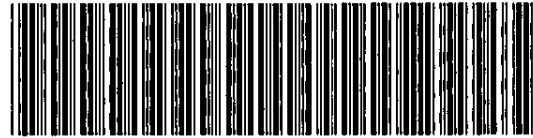
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
DEC 27 2011
EXAMINER

POST & ROMERO

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

3195 PONCE DE LEON BOULEVARD
SUITE 400
CORAL GABLES, FLORIDA 33134
TEL: (305) 445-0014
FAX: (305) 445-6872

LAW OFFICE OF
CARLOS A. ROMERO, JR., P.A.

CARLOS A. ROMERO, JR.
ADMITTED: FLORIDA, ILLINOIS, PUERTO RICO
E-MAIL: car@postandromero.com

ROBERT G. POST, P.A.

ROBERT G. POST
ADMITTED: FLORIDA, NEW YORK
E-MAIL: rgp@postandromero.com

December 21, 2011

BY EXPRESS MAIL #EM 521325730US

Florida Department of State
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: RESIGNATION OF REGISTERED AGENT

Dear Gentlemen:

I enclose my resignation as registered agent for Spartan Investment Group, LLC. I also enclose the filing fee in the amount of \$85.

Sincerely yours,

POST & ROMERO


Carlos A. Romero, Jr.
For the Firm

CAR/kv

Encl. - Resignation form and cover letter
- Wach(cap) ck no. 5110

cc (by email): Fernando Rivera Munich

(Red/General)LtrFLDeptState122111a

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Spartan Investment Group, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L08000036835

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:

Fernando Rivera Munich
Name of Person

Citi Towers Suite 502
Name of Firm/Company

252 Ponce de Leon Ave
Address

San Juan, Puerto Rico 00918
City/State and Zip Code

frivera@rmmelaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fernando Rivera at (787) 426-1717
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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TALLAHASSEE, FLORIDA

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,

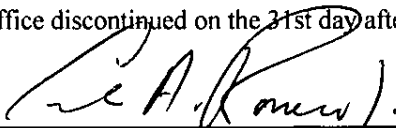
Law Office of Carlos A. Romero, Jr. PA, hereby resigns as
Name of Registered Agent

Registered Agent for Spartan Investment Group, LLC
Name of Limited Liability Company

L08000036835
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:

Carlos A. Romero, Jr.
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