L08000/11036

| (Requestor's Name) | | | | |
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| (Addross) | | | | |
| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
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| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| (Boodinent Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filling Officer: | | | | |
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Office Use Only



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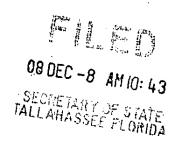


COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|---|
| SUBJECT: BELENDER ONE LLC | |
| (Name of Limited Liability Co | mpany) |
| The enclosed member, managing member or manager resigning. | gnation and fee(s) are submitted for |
| Please return all correspondence concerning this matter to | |
| ROBERT G. HARRIS, ESQ. | |
| (Contact Person) | _ |
| LAW OFFICE OF ROBERT G. HARRIS | _ |
| (Firm/Company) | |
| 5355 Town Center Road #801 | |
| (Address) | _ |
| Boca Raton, Florida 33486 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| ROBERT G. HARRIS, ESQ. at (561 | 391-4900 |
| (Name of Contact Person) (Area Code | & Daytime Telephone Number) |
| Enclosed please find a check made payable to the Florida I X \$25 Filing Fee | Department of State for: \$55 Filing Fee & Certified Copy |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| Clifton Building 2661 Executive Center Circle | P.O. Box 6327 |
| Tallahassee, Florida 32301 | 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

| | | | · |
|---------------------|--------------------------------|-------------------------------|---------------------------|
| | e limited liability company a | = = | of the Florida Departmen |
| of State is: | BELENDER ONE LI | LC | |
| | | | |
| 2. This limited lia | bility company was organize | d under the laws of: | |
| FL | ORIDA | • | |
| | | | |
| 3. The Florida do | cument/registration number o | of this limited liability com | nany ie: |
| 5. The Horida do | L08000111036 | • | pany is. |
| | <u> </u> | • | |
| 4.I, ROBERT | G. HARRIS | , hereby resign as a _ | Member |
| | Name of Person Resigning) | ,,, | (Print Title) |
| | ability company and affirm the | ne limited liability compan | y has been notified of my |
| resignation in w | riting. | | |
| | <i>)</i> | // | |
| (/CD(| unit ? | Harris | |
| Signature of Re | signing Member, Managing I | Member or Manager | |
| - | BERT G. HARRIS | · · | |
| | , | | |
| | \$25.00 (Required) | | |
| Certified Conv. | \$30.00 (Ontional) | | |