L08000115898

(Re	equestor's Name)	
(Ac	ddress)	-
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Office Use Only



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T. CLINE
JUL 13 2010
EXAMINER

SECRETARY OF STATE ALLAHASSEE, FLORIDA

And The Buildings Business and San West San West

COVER LETTER

SUBJECT:	ERAM LLC		
	Name of Limited Liability C	Company	*************************************
DOCUMENT NUMBER:	L0800011	5898	····
The enclosed Resignation of R for filing.	egistered Agent for a Limited I	Liability Company and	d fee are submitted
Please return all corresponden	ce concerning this matter to the	following:	
Mary E Name of	. Fink Person	and the second of the second	
National Corporate I		·	
615 S. Dupo Addr			
Dover, DE City/State an			TALL TALL
mfink@nation E-mail address: (to be used for	nalcorp.com future annual report notification)		RETARY AHASSE
For further information concern	ning this matter, please call:	ı	PH E
			五字

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Name of Person

TO:

Amendment Section Division of Corporations

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

Area Code & Daytime Telephone Number

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

	Research, LTD, Inc.	_, hereby resigns a	s
Name of Regi	istered Agent	•	
Registered Agent for	ERAM LLC		,
		1	
Na Na	ame of Limited Liability Company		
	•	:	•
L08000115898			•
Document Number, if known	1		
	d to the above listed limited liability ice discontinued on the 31st day after	•	
The agency is terminated and the off	ice discontinued on the 31st day after	•	
The agency is terminated and the off	· ·	•	
	ice discontinued on the 31st day after	•	n this statement is file
The agency is terminated and the off	Signature of Resigning Agent Wayne Rafanelli	•	n this statement is file
The agency is terminated and the off	ice discontinued on the 31st day after apple la fauelle Signature of Resigning Agent	•	
The agency is terminated and the off	Signature of Resigning Agent Wayne Rafanelli Typed or Printed Name ional Corporate Research, LT	er the date on which	n this statement is file
The agency is terminated and the off	Signature of Resigning Agent Wayne Rafanelli Typed or Printed Name	er the date on which	TALLAHASSE
The agency is terminated and the off	Signature of Resigning Agent Wayne Rafanelli Typed or Printed Name ional Corporate Research, LT	er the date on which	secreta TALLAHAS

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