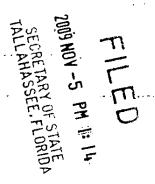
LD9000090318

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C. LEWIS

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EXAMINER



N. MICHAEL KOUSKOUTIS, P.A.

623 East Tarpon Avenue Tarpon Springs, FL 34689 Ph: 727-942-3631 Fax: 727-937-5453

October 29, 2009

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Panama Dreams, LLC. - Document No. L09000090318

Dear Ladies/Gentlemen:

Enclosed you will find our check totaling the amount of \$25.00 to cover the cost of filing the following document:

• Resignation of Member Managing Member or Manager from Florida or Foreign Limited Liability Company

If you have any questions or concerns, please contact this office at your earliest convenience. I thank you in advance for your prompt attention to this matter.

Sincerely,

N. MICHAEL KOUSKOUTIS, P.A.

Joni L. Buscema Legal Assistant to

N. Michael Kouskoutis, Esquire

JLB

PC

Enclosures: As referenced above

... · · · · · ·

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Panama Dreams, L.L.C.	
(Name of Limited Lia	bility Company)
The enclosed member, managing member or mana filing.	ger resignation and fee(s) are submitted fo
Please return all correspondence concerning this m	atter to:
N. Michael Kouskoutis, Esquire	
(Contact Person)	
N. Michael Kouskoutis, P.A.	
(Firm/Company)	
623 E. Tarpon Avenue	·
(Address)	
Tarpon Springs, FL 34689	
(City/State and Zip Code)	
For further information concerning this matter, ple	ease call:
Joni L. Buscema	727) 942-3631 Area Code & Daytime Telephone Number)
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
-	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FILED 2009 NOV -5 PM # 14 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Filing Fee: Certified Copy:

\$25.00 (Required) \$30.00 (Optional)