"L10000008531

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
, , , , , , , , , , , , , , , , , , , ,				
PICK-UP WAIT MAIL				
(Durings Fulfs Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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TALL AND SECRETARY OF STATE

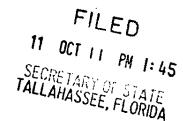
Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 3JAG3 PROPERTIES LLC	
(Name of Limited Liability Co	mpany)
The enclosed member, managing member or manager resifiling.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to	:
PETER B WEINTRAUB ESQUIRE	
(Contact Person)	_
WEINTRAUB & WEINTRAUB PA	
(Firm/Company)	
2700 N MILITARY TRAIL SUITE 355	
(Address)	
BOCA RATON FL 33431	_
(City/State and Zip Code)	·
For further information concerning this matter, please call	:
PETER B WEINTRAUB at 561	988-6411
(Name of Contact Person) (Area Cod	e & 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 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as		of the Florida Department
of State is: 3JA	AG3 PROPERTIES LI	LC	
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doce L10000008	ument/registration number of	this limited liability com	pany is:
4. I, MERIDET	H LEEDS	, hereby resign as a _	MGRM
(Print)	lame of Person Resigning)		(Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability compan	y has been notified of my
1	Carola Las D		,
Signature of Res	gning Member, Managing M	lember or Manager	
Filing Fee:	\$25.00 (Required)		,
Certified Copy:	\$30.00 (Optional)		