

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617 -6383

From:

Account Name

: FOWLER WHITE BURNETT

Account Number: 071250001512

Fax Number

: (305)789 -9200 : (305)789 -9201

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.



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COVER LETTER			
TO: Registration Section Division of Corporations			
SUBJECT: CAYPACCO PYO (Name of Limited Liabil)	perties LLC lity Company)		
The enclosed member, managing member or manage filing.	er resignation and fee(s) are submitted for		
Please return all correspondence concerning this mat	ter to:		
Jeanne Frentes Lex (Contact Person)	262		
Fowler white Burne	<u>tt</u>		
1395 Brickell Ave, 14th	bflow		
MIami, R 33131 (City/State and Zip Code)			
For further information concerning this matter, please	e call:		
Jeanne Fuentes at (30 (Area (Area))	2000 & Daytime Telephone Number)		
Enclosed please find a check made payable to the Flo \$25 Filing Fee	state for: \$55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 CR2E079 (5/06)	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 323143RY 05 STATE TOTAL CORPORT OF STATE TOTAL CORPORATION OF STATE TOTAL CORPORT OF		

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is:	limited liability company as it appears on the records of the Florida Department of Paccas Properties Luc.	ent -
,	ility company was organized under the laws of:	
3. The Florida docu <u>L 1000</u>	ament/registration number of this limited liability company is:	
4.1, Nazim	hereby resign as a Mayagev (Print Title)	-
of this limited liab resignation in wn	pility company and affirm the limited liability company has been notified of miting.	ıy
Signature of Resig	gring Member, Managing Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	
~		

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CR2E079 (5/06)