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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
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2012 JUN 20 AM II: 44
SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

JUN 21 2012

EXAMINER

June 15, 2012

RE: LBUBS 2007-C2 ANDERSON SNOW ROAD, LLC

(FL. DOM.) (FL. DOM.)

LBUBS 2007-C2 ORANGE AVENUE, LLC

(FL. DOM.)

WALTON STREET ADVISORS, LLC

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 check in the amount of \$255.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure



RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

	_	
SYSTEM	hereby resigns as	
(Name of Registered Agent)	, 10.00) 100,8.15 a.	
BUBS 2007-C2 ORANGE AVENU	E, LLC (FL. DOM.)	
(Name of Limited Liability Comp	pany)	
per, if known)		
n was mailed to the above listed limit	red liability company at its last known address.	
_ LAQU	<i>(</i>	d.
n entity:	LAE JUN	11
C T CORPORATION SYSTEM -	Theresa Alfieri 20	
		0
(Capacity)	SATE OF THE PARTY	
	(Name of Registered Agent) BUBS 2007-C2 ORANGE AVENU (Name of Limited Liability Comport, if known) on was mailed to the above listed limited and the office discontinued on the 3 (Signature of Registered Agent) (Signature of Registered Agent) (Signature of Registered Agent) (Signature of Registered Agent)	(Name of Registered Agent) .BUBS 2007-C2 ORANGE AVENUE, LLC (FL. DOM.) (Name of Limited Liability Company) or, if known) on was mailed to the above listed limited liability company at its last known address. If and the office discontinued on the 31st day after the date on which this statement is file (Signature of Registered Agent) (Signature of Limited Liability Company) The entity: C T CORPORATION SYSTEM - Theresa Alfieri (Typed or Printed Name) ASSISTANT SECRETARY

FILING FEES:

\$ 85.00 \$ 25.00

Active limited liability company
Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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