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T. HAMPTON

DEC - 0 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PLANTATION OFFICE SUITES LLC (Name of Limited Liability Company)	
The enclosed member, managing member or manager resignation and fee(s) are submitted filing.	for
Please return all correspondence concerning this matter to:	
Anne BROGOUL MEEHL (Contact Person)	
PLANTATION OFFICE SUITESLIC (Firm/Company)	
8551 W, SUNRISE FOUN-Ste 105	
PLANTATION, FL 33322_ (City/State and Zip Code)	
For further information concerning this matter, please call:	
Anne Onovol MEEHL at (954) 332-6090 (Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company ANTATION OFF				artment
2. This limited liabil FLORINA	ity company was organiz	ed under the law	vs of:		
3. The Florida docur	nent/registration number 31 42 6	of this limited li	ability compa	ny is:	
4. I, No Hh	alie Pierret ne of Person Resigning)	, hereby r	esign as a	MAWA GE (Print Title)	R_
of this limited liabi resignation in writi	lity company and affirm ng.	the limited liabil	ity company ł	nas been notified	of my
Signature of Resig	ning Member, Managing	Member or Man	nager		
Filing Fee:	\$25.00 (Required)			TAL	2011
Certified Copy:	\$30.00 (Optional)			CNETARY O LAHASSEE.	DII DEC -2 P

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