L11000038050

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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SPECKETARY OF STATE

OIVISION OF CORPORATIONS

C. LEWIS

NOV 3 0 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 15, 2012

ROBERT J. GORMAN, ESQ. ROBERT J. GORMAN & ASSOCIATES 1209 DELAWARE AVE. FORT PIERCE, FL 34950

SUBJECT: BROWARD CYPRESS PROPERTIES, LLC

Ref. Number: L11000038050

We have received your document for BROWARD CYPRESS PROPERTIES, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6051.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 512A00027619

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: BROWARD Cypress Properties LLC Name of Limited Liability Company				
DOCUMENT NUMBER: L 110000 38050				
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Robert J. Gorman				
Robert J. Gorman & Associates, P.A. Name of Firm/Company				
1209 Delaware Avenue Address				
FORT Pierce, FL 34950 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Robert J. Gorman at (772) 465-5311 Name of Person at (772) 465-5311 Area Code & Daytime Telephone Number				
Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.				
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,		
Robert J. Gorman, Eso., hereby resigns as		
Registered Agent for Broward Cypress Properfies, LLC	 	
Name of Limited Liability Company	_,	
L 11000038050 Document Number, if known		
A copy of this resignation was mailed to the above listed limited liability company at its last known address	; .	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement	is file	i.
Robert Houne Stignature of Resigning Agent		
If signing on behalf of an entity: Robert J. Gorman Typed or Printed Name	2812 NOV 30	SECRETARY C
Capacity	PH 1: 5:	PORATE I

FILING FEES:

\$ 85.00 Active limited liability company

\$ 25.00 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