

02/25/2013

3:50 BELOFF

DIVISION OF CORPORATIONS

L11000071259

(FAX)305673-5505

P.001/003

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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 : LAW OFFICE OF GERALD K. SCHWARTZ, P.A.
Account Number : I20080000383
Phone : (305)673-1101
Fax Number : (305)673-5505

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

Email Address: jd6@beloffparker.com

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TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THE BIG STRENGTH CORPORATION

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A & B COLLINS 16 LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

JONATHAN D. BELOFF

(Contact Person)

BELOFF | PARKER | JACOBS , PLC

(Firm/Company)

1691 MICHIGAN AVENUE SUITE: 320

(Address)

MIAMI BEACH, FLORIDA 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

JONATHAN D. BELOFF at (305) 673-1101

(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

\$55 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

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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 limited liability company as it appears on the records of the Florida Department of State is: AB COLLINS 16 LLC

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
L11000071259

4. I, AVIRAM AMIR, hereby resign as a MEMBER/ MANAGING MEMBER
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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