

02/25/2013

3:50 BELOFF

DIVISION OF CORPORATIONS

(FAX) 305 673-5505

P.001/003

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L110000071259

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 : I200800000383  
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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SECRETARY OF STATE  
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**

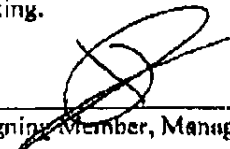
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: AB COLLINS 16 LLC

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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