L11000089543

(Requestor's Nan	ne)
(Address)	<u> </u>
(Address)	
(City/State/Zip/Ph	one #)
PICK-UP WAIT	MAIL.
(Business Entity I	Name)
(Document Numb	per)
Certified Copies Certifica	ates of Status
Special Instructions to Filing Officer:	





800262804308

07/31/14--01011--020 **87.50

AUG 11 2014

C. CARROTHERS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 738 SW 107th Aver	nue LLC
(Na	me of Alien Business Organization)
DOCUMENT NUMBER: L110000	089593
The enclosed Resignation of Registere submitted for filing.	ed Agent for an Alien Business Organization and fees are
Please return all correspondence conc	erning this matter to the following:
Brian J. McCarthy, Esq.	
(Name of Person)
Kaplan Zeena LLP	
(Name of Firm/Comp	pany)
2 S. Biscayne Blvd., Suite 30	50
(Address)	
Miami, FL 33131	
(City/State and Zip C	Code)
For further information concerning th	is matter, please call:
Brian J. McCarthy	at (305) 530-0800 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check made payable to t \$87.50 Filing fee	
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF REGISTERED AGENT FOR AN ALIEN BUSINESS ORGANIZATION

Pursuant to the provisions of section 607.0502(2) Florida Statutes,

the undersigned,	Brian J. McCarthy
	(Name of Registered Agent)
hereby resigns as	Registered Agent for 738 S.W. 107th Avenue LLC
	(Name of Alien Busiless Organization)
L1100008959	93
(Document	Number, if known)
A copy of this reknown address.	esignation was mailed to the above listed alien business organization at its last
The agency is ter this statement is t	minated and the office discontinued on the 31st day after the date on which filed.
	(Signature of Resigning Agent)
If signing on beha	alf of an entity:
	(Typed or Printed Name)
	(Capacity)

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Filing Fee: \$87.50 Certified Copy: \$52.50