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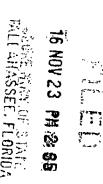
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COVER LETTER

Tallahassee, Florida 32301

CR2E079 (2/14)

_	ration Section on of Corpora			
SUBJECT: _	1448	MAIN	STARRY	LLL
		(Name of	Limited Liability Co	mpany)
The enclosed	member, resi	gnation or diss	sociation and fee(s) are submitted for filing.
Please return a	all correspond	dence concerni	ing this matter to	:
CHALO	TODHER	J. BROS	WN	
	(Cont	act Person)	· · · · · · · · · · · · · · · · · · ·	_
144	18 MA	N STREE	r LLC	
	(Firm	'Company)	r zuc	
210		22.0 ***	<i>,</i>),	
_3/3	LOOKOO!	dress)	121.	_
		- <i>n</i>	_	
OSPRA	ey, pe	347	29	
	(City/Stat	e and Zip Code)		
For further inf	formation cor	cerning this n	natter, please call	:
CHUSTOP	HER I.	BROWN	at (941	20 - 7770 e & Daytime Telephone Number)
(Na	me of Contact	Person)	(Area Cod	e & Daytime Telephone Number)
Enclosed plea	se find a chec	ck made payab		Department of State for:
🔏 \$25 Filing	Fee		□ \$55 Filin	g Fee & Certified Copy
STREET/CO	-	DRESS:		MAILING ADDRESS:
Registration S				Registration Section
Division of Co	-			Division of Corporations P.O. Box 6327
Clifton Buildi 2661 Executiv		cle		Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability con	npany as	it appears on	the	records o	f the Flor	ida Dep	artme	nt
of State is:	1448 MA	IN 5	TREET	<i>,</i>	LLC	 			_•
	ment/registration not only 1250 mber/manager without Manager w	206	·			•	AHAS	16 NOV 23 PM 2: 05	d Section 1
	R M (Print Title)						> .	•	
of this limited lial resignation in wri	bility company and a ting.	affirm the	e limited liab	ility	company	has been	notifie	d of m	y
Signature of Di	ssociating Metabel	Or Resign	Manager	r					
-	\$25.00 (Require \$30.00 (Optional	,							