

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

295000000459

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

_____ of _____
 RE: AUBREY PROPERTY MANAGEMENT, L.C.

- | | | | |
|-------|---|--|--|
| _____ | Express _____ | | |
| _____ | Art. of Amend. File _____ | | |
| _____ | Corp. Record Search _____ | | |
| _____ | Ltd. Partnership File _____ | | |
| _____ | Foreign Corp. File _____ | | |
| _____ | () Cert. Copy(s) _____ | | |
| _____ | Art. of Amend. File _____ | | |
| _____ | Dissolution/Withdrawal _____ | | |
| _____ | C U S - _____ | | |
| _____ | Fictitious Name File _____ | | |
| _____ | Name Reservation _____ | | |
| _____ | Annual Report/Reinstatement _____ | | |
| _____ | Reg. Agent State Resignation _____ | | |
| _____ | Document Filing _____ | | |
| _____ | Corporate Kit _____ | | |
| _____ | Vehicle Search _____ | | |
| _____ | Driving Record _____ | | |
| _____ | Document Retrieval <u>00002138881</u> _____ | | |
| _____ | UCC 1 or 3 File _____ | | |
| _____ | UCC 11 Search _____ | | |
| _____ | UCC 11 Retrieval _____ | | |
| _____ | File No.'s, _____ Copies _____ | | |
| _____ | Courier Service _____ | | |
| _____ | Shipping/Handling _____ | | |
| _____ | Phone () _____ | | |
| _____ | Top Priority _____ | | |
| _____ | Express Mail Prep. _____ | | |
| _____ | FAX () _____ pgs. _____ | | |

97 APR 10 PM 1:41
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

04/10/97-01036-014
 **** 00.00 **** 05.00

SUBTOTALS _____	
FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ <u>4/10</u>
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____

97
 DEPT. OF STATE
 DIVISION
 TALLAHASSEE
 REC
 APR 10
 RA
 Resign

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	<u>4/10/97</u>	_____	_____
TIME	<u>11:41</u>	_____	CK No. _____
BY	<u>[Signature]</u>	_____	_____

WALK-IN
 Will Pick Up _____

Please remit Invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

FILED
97 APR 10 PM 1:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**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,

Capital Connection, Inc., hereby resigns as
(Name of Registered Agent)

Registered Agent for Aubrey Property Management, L.C.

(Name of Limited Liability Company)

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 filed.



(Signature)

Weimar Lopez, Registered Agent Coordinator

FILING FEES:

\$ 87.50 Active Limited Liability Company
\$ 35.00 Dissolved Limited Liability Company

INHS17(3/95)