

L98000000693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

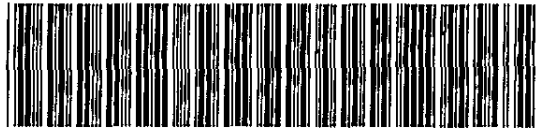
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L98-693

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06/01/04--01069--010 \*\*350.00

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 JUN 17 PM 1:31



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

June 10, 2004

CHRIS WOHLBRANDT  
VOGEL LAW OFFICE, P.A.  
3936 TAMiami TRAIL NORTH, STE. B  
NAPLES, FL 34103

SUBJECT: TIDES INN MANAGEMENT COMPANY, L.C.  
Ref. Number: L98000000693

We have received your document for TIDES INN MANAGEMENT COMPANY, L.C. and your check(s) totaling \$350.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick  
Document Specialist

Letter Number: 204A00039375

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**VOGEL LAW OFFICE**  
A PROFESSIONAL ASSOCIATION

Richard M. Vogel  
James D. Vogel  
Joseph E. Ujcz

Suite B, Midwest Title Building  
3936 Tamiami Trail North  
Naples, Florida 34103

Telephone (239) 262-2211  
Facsimile (239) 262-8330

May 4, 2004

**TRANSMITTAL LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT:	Sandpiper Gulf Resort II, LLC	L00000003547	\$87.50
	Sandpiper Gulf Resort, LLC	L00000003645	\$87.50
	HCPT Investments, LLC	L01000009964	\$35.00
	Tides Inn Acquisition Company, L.C.	L98000000692	\$35.00
	Tides Inn Management Company, L.C.	L98000000693	\$35.00
	Inns By The Sea, LLC	L99000007245	\$35.00
	214 Property, LLC	L00000009662	\$35.00

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning these matters to the following:

Chris Wohlbrandt  
Vogel Law Office, P.A.  
3936 Tamiami Trail North, Suite B  
Naples, FL 34103

For further information concerning these matters, please call:

Chris Wohlbrandt at 239-262-2211

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TIDES INN MANAGEMENT COMPANY, LC  
(Name of Limited Liability Company)

**DOCUMENT NUMBER:** L98000000693

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chris Wohlbrandt  
(Name of Person)

Vogel Law Office, P.A.  
(Name of Firm/Company)

3936 Tamiami Trail North, Suite B  
(Address)

Naples, FL 34103  
(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Wohlbrandt at ( 239 ) 262-2211  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

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## 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,

JAMES D. VOGEL

, hereby resigns as

(Name of Registered Agent)

Registered Agent for TIDES INN MANAGEMENT COMPANY, LC

(Name of Limited Liability Company)

L98000000693

(Document Number, if known)

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 of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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DIVISION OF CORPORATIONS  
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### FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

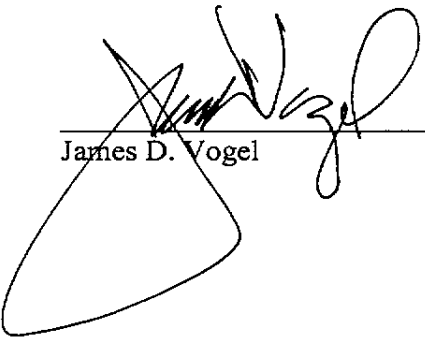
Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

### **RESIGNATION OF REGISTERED AGENT**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, James D. Vogel, hereby resigns as Registered Agent for Tides Inn Management Company, L.C., Document Number: L98000000693.

A copy of this resignation was mailed to the above-listed corporation 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.

  
James D. Vogel