Division of Corporations

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To:

Division of Corporations

Fax Number

1 (850)617-6383

From:

: GUNSTER YOAKLEY & STEWART P.A. Account Name

Account Number : 076077002561 Phone : (305)376-4181

: (305)376~6010 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

LLC REGISTERED AGENT RESIGNATION MARGARITA PROPERTIES, L.L.C.

	
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D. BRUCE

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: MARGARITA PR	ROPERTIES, L.L.C.
_	L9900003144
The enclosed Resignation of Registered Agent for for filing.	r a Limited Liability Company and fee are submitted
Please return all correspondence concerning this r	natter to the following:
Alexandra de St. Croix, Paralegal	
Name of Person	<u> </u>
Gunster	
Name of Firm/Company	
	SS 26
2 South Biscayne Blvd., Suite 3400	
Address	T (0)
Miami, Florida 33131 City/State and Zip Code	1 JUL 26 AH 8: 49 LORE FARY OF STATE LLAHASSEE, FLORIDA
adest.croix@gunster.com E-mail address: (to be used for future annual report no	offication)
For further information concerning this matter, ple	ease call:
Alexandra de St. Croix, Paralegal at (305 376-4181 Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida I liability company or \$25.00 for an administrativel limited liability company.	Department of State for \$85.00 for an active limited y dissolved, voluntarily dissolved or withdrawn
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	7001 Executive Center Circle

Tallahassee, FL 32301

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	is of section 608.416(2) or 608.509, Florida Statutes, the undersigned.	
GY (Corporate Services, Inc. , hereby resigns as	
	Name of Registered Agent	
Registered Agent for	MARGARITA PROPERTIES, L.L.C.	
<u></u>	Name of Limited Liability Company	
	0003144	
Document Nu	mber, if known	
A copy of this resignation	n was mailed to the above listed limited liability company at its last known address.	
If signing on behalf of an	Signarure of Resigning Agent entity: Mark J. Scheer	
	Typed or Printed Name	
	President	
	Capacity	
	\$ 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	

INHS17 (08/05)