

M00000000224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

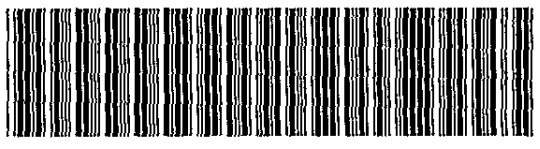
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 OCT - 8 AM 10:36
SECRETARY OF STATE
TALLAHASSEE FL 091

M00000000224
at 10-8-04
RAKES

CFRA, LLC
Registered Agent Services
A Subsidiary of Carlton Fields

CORPORATE CENTER THREE AT INTERNATIONAL PLAZA
4221 W BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FLORIDA 33607-5736

MAILING ADDRESS:
P. O. BOX 3239
TAMPA, FLORIDA 33601-3239
TEL (813) 223-7000 FAX (813) 229-4133

September 30, 2004

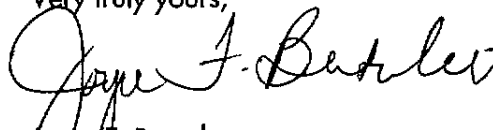
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: Resignation of Registered Agent

Gentlemen:

Please find enclosed a resignation of registered agent form for Mediterranean, L.L.C. Also enclosed is Carlton Fields' Check No. 350739 in the amount of \$85.00 for the filing fee.

Very truly yours,


Joyce F. Bentubo
Administrative Assistant

JFB/mlb
Enclosures

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

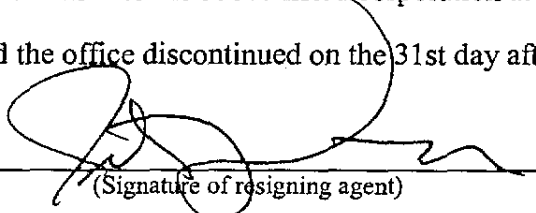
Pursuant to the provisions of sections 608.416(2) or 608.509, Florida Statutes, the undersigned,

CFRA, LLC hereby resigns as
(Name of registered agent)

Registered Agent for Mediterranean, L.L.C.
(Name of Limited Liability Company)

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.


(Signature of resigning agent)

If signing on behalf of an entity:

Peter J. Winders
(Typed or Printed Name)

Vice President
(Capacity)

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

FILING FEES::

\$85.00 Active corporation
\$25.00 Administratively dissolved corporation

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

INHS17(10/99)