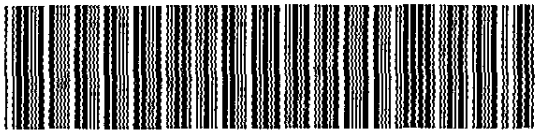
m01000000766

03 JUL 7 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



600021042266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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07/07/03--01080--001 **25.00

(Business Entity Name)

(Document Number)

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CT CORPORATION

June 30, 2003

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: MW FLORIDA, LLC. (DE. DOM.)

Secretary of State
Corporate Records Bureau
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Dear Sir:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed are 1 checks in the amount of $25.00 each to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri
Senior Supervisor &
Assistant Secretary

TA/hm
Enclosure

111 Eighth Avenue
New York, NY 10011
Tel. 212 894 8940
Fax 212 590 9180

June 30, 2003

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TA/hm
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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,

C T CORPORATION SYSTEM , hereby resigns as
(Name of Registered Agent)

Registered Agent for MW FLORIDA, LLC. (DE. DOM.) (M01000000766)

(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 of resigning agent)

If signing on behalf of an entity:

C T CORPORATION SYSTEM - THERESA ALFIERI
(Typed or printed name)

ASSISTANT SECRETARY
(Capacity)

FILING FEES:
$ 85.00 Active Limited Liability Company
$ 25.00 Dissolved 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(10/99)