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Division of Corporations

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From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242 Phone : (215)563-8113 Fax Number : (215)977-9386

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LLC REGISTERED AGENT RESIGNATION LRA REUNION GOLF COURSE, LLC

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To:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of	f section 605.011	Florida Statutes, the undersigned	:d,				
Virginia Tee, Esq.	, here	, hereby resigns as					
Nan	ne of Registered Age	nt					
Registered Agent for LRA	REUNION GO	DLF COURSE, LLC	.				
	Name of Lin	nited Lability Company			······································		
M06000000643							
Document Number	r, if known						
A convinithis resignation w	as mailed to the a	above listed limited liability comp	any at its la	st known	address.		
	Miga	Signature of Resigning Agent					
If signing on behalf of an en	tity:			2919 OCT			
Vi	rginia Tee. Es	q.	<u>></u> -	9	1		
Re	T egistered Agel	yped or Printed Name		T 3	i rampa dia na pan		
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	FILING \$ 85,00 \$ 25.00	FEES: Active limited liability compar Administratively dissolved/vo		ಲಾ ssolved/			

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

withdrawn limited liability company

INHS17 (2/14)

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