

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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T	o:	Philadae of Commenters		
		Division of Corporations Fax Number : (850)617-6383		
F	From:	Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES Account Number : 075350000353 Phone : (800)221-2972 Fax Number : (917)243-5843	i, INC.	
	annu	ne email address for this business entity to be used for all report mailings. Enter only one email address pleas		nue
Ē	- Emai	1 Address:	.,	22
	.,			
- ]	<b>∀</b> 11:	LLC REGISTERED AGENT RESIGNATION		FE9 -
	M - 34A	LLC REGISTERED AGENT RESIGNATION 350 E.134TH STREET PARTNERS, LLC	. <u>.</u>	
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## COVER LETTER

Division of Corporations	
SUBJECT: 350 E. 134TH STREET PARTNERS, LLC Name of Limited Liability	
	Company
DOCUMENT NUMBER: M16000007072	***************************************
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to th	e following:
TRACEL COTTON	
Name of Person	
BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.	
Name of Firm/Company	
100 WALL STREET, SUITE 503	
Aédress	
NEW YORK, NY 19005	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TRACEE COTTON 300 at (	221-2972 X1550 ) Daytime Telephone Number
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\$85,00 for an active limited liability company or \$25,00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115, 1	Florida Statutes, the unde	rsigned,			
BLUMBERGEXCELSIOR CORPORATE SERVICES, INC. hereby a			hereby resions as			
BLUMBERGEXCELSIOR CORPORATE SERVICES, INC. , hereby  Name of Registered Agent , hereby						
Registered Agent for		RTNERS, LLC			<del></del>	<b></b> .
***************************************	Name of Limite	d Liability Company				1
M16000007072						
Document Na	umber, if known	n				
A copy of this resignation	on was mailed to the abo	we listed limited hability	company at its last &	nown a	ddres	s.
The agency is terminate	ed and the office disconti	nued on the 31st day after	r the date on which th	nis state	ment	is filed
	-1970 E	ignature of Resigning Agent	<del></del>			
If signing on behalf of a	in entity:					
	MARY BROOKS					
	Турс	d or Printed Name	<del></del>			
	ASSISTANT SECRETA	ARY	: : ·	. !	22	
		Capacity	<u> </u>	- !	633	
	FILING FI \$ 85.00 \$ 25.00	EES: Active limited liability co Administratively dissolve withdrawn limited liabili	ompany sd/volumarily dissol ty company	ved/ ====================================	-3 AH II:	I ILED

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