M9800001441

(Re	questor's Name)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	· #f)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nam	ie)
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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R.A. Resegnation LFT 7-26-04

CT CORPORATION

July 9, 2004

RE: THE TALLAHASSEE PLAZA, L.L.C. (MI.DOM.)

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is <u>1</u> check in amount of \$85.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Senior Supervisor & Assistant Secretary

TA/lk Enclosure

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.56	09, Florida Statutes, the undersigned,	
C T CORPORATION SYSTEM	, hereby resigns as	
(Name of Registered Agent)	, hereby resigns as	
Registered Agent for		
THE TALLAHASSEE PLAZA, L.L.C.	(MI.DOM.)	
(Name of Limited Liability	Company)	
M98000001441		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed I The agency is terminated and the office discontinued on the office d	the 31st day after the date on which this statement is filed.	
If signing on behalf of an entity:		
C T CORPORATION SYSTEM	M - Theresa Alfieri	
(Typed or Printed ASSISTANT SEC	ŕ	
(Capacity)		

FILING FEES: \$ 85.00 Activ \$ 25.00 Admi Active limited liability company
Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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