M99000000363

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |

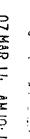
Office Use Only



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SECRETARY OF STATE ALLAHASSEF FLORIOA



March 8, 2007

RE: MIDWEST PROPERTIES, LLC.

SNAAC, LLC.

(KY. DOM.) (DE. DOM.)

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 checks in the amount of \$50.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure RPP



RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provis | ions of section 608.416(2) or 608.509, Florida Sta | atutes, the undersigned, |
|-------------------------|--|---|
| C T CORPORATIO | , hereby resigns as | |
| | (Name of Registered Agent) | |
| Registered Agent for | MIDWEST PROPERTIES, LLC. (KY. DOM. |) |
| | (Name of Limited Liability Company) | |
| M99000 | 000363 | |
| (Document Nu | ımber, if known) | |
| _ | tion was mailed to the above listed limited liabilit | - · · · · - · · · · · · · · · · · · · · |
| The agency is termina | ted and the office discontinued on the 31st day af (Signature of Resigning Agent) | fier the date on which this statement is filed. AHASSE |
| If signing on behalf of | an entity: | AF STATE FLORIDA |
| | C T CORPORATION SYSTEM - Theresa A | Alfieri Sa S S |
| | (Typed or Printed Name) ASSISTANT SECRETARY | DA TE |
| | (Capacity) | |

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 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withdrawn limited liability company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