**CT** CORPORATION SYSTEM

## M9900001989

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

December 6, 2000

RE: MLP LACOSTA, L.L.C.

(MO.DOM.)

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

000003496430--4 -12/12/08--01021--002 \*\*\*\*\*85.00 \*\*\*\*\*85.00

Dear Sir:

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

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-addressed envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri Senior Supervisor

TA:lk Enclosure 

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section	1 608.416(2) or 60	8.509, Florida Statu	tes, the undersigned	,	
C T CORPORATION	SYSTEM	•	, hereby resigns	as	
(Name of Reg	ristered Agent)		•	٠	
Registered Agent for		<del></del>			<del>_</del>
MLP LAC	COSTA, L.L.C.	(MO.DOM.)	- 6 -	-	-
N	ame of Limited Liabi	lity Company)			<del>-</del>
A copy of this resignation was manaddress.  The agency is terminated and the statement is filed.  If signing on behalf of an entity:	e office discontinue of Signature of	ued on the 31st da	-	SETRETARY TALE AHASSE	
•	Theresa Alf:				
<del>_</del> .	(Typed or p	orinted name)	e to the		
Ass	istant Secret	ary		7 (12) (7) 424	
	(Capa	city)	-	_	

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