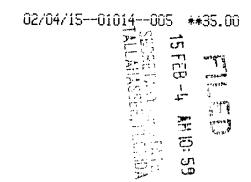
P140000 25173

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
. (Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

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TRANSMITTAL LETTER

LT 77 NW 77 INC (Name of Corporation) DOCUMENT NUMBER: P14000025173 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Samuel Strauch (Name of Person) (Name of Firm/Company) 1680 Michigan Avenue, Suite 1024 (Address) Miami Beach, FL 33139 (City/State and Zip Code) For further information concerning this matter, please call: Samuel Strauch (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address:

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ւ Samuel Strauch	, hereby resign as Vice President
	(Title)
of LT 77 NW 77 INC	,
P14000025173 (Document Number, if known)	corporation organized under the laws of the State of
Florida	THE TENT
(Signat	ure of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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