

P96000078875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

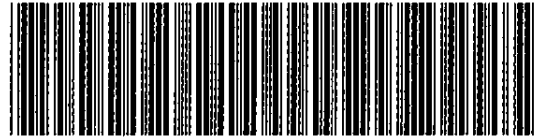
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800230638478

*Resignation
to RA*

04/24/12--01003--006 **230.00

FILED
2012 APR 24 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*RR
4/27/12*

CFRA, LLC

A Subsidiary of CARLTON FIELDS

Registered Agent Services

100 S. Ashley Drive | Suite 400

Tampa, Florida 33602

P. O. Box 3239 | Tampa, Florida 33601-3239

813.223.7000 | fax 813.229.4133

April 19, 2012


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

**Re: RESIGNATION OF REGISTERED AGENT –
AF BYRD CENTER VA, LLC
ADLER PARKLANE MANAGER, LLC
BSA DECISION SUPPORT SYSTEMS, LLC
PREMIER HOSPITALITY MANAGEMENT, INC.
SOTTO VELA, LLC
TERRAZAS HOLDINGS, INC.**

Gentlemen:

Please find enclosed Resignation of Registered Agent forms for the above referenced entities. Also enclosed is Carlton Fields' Check No. 520241 totaling \$230.00 for the filing fees for these entities.

Very Truly Yours,



Joyce F. Bentubo
Secretary

JFB/kmt
Enclosures

FILED

2012 APR 24 AM 9:00

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, CFRA, LLC

(Name of Registered Agent)

hereby resigns as Registered Agent for PREMIER HOSPITALITY MANAGEMENT, INC.

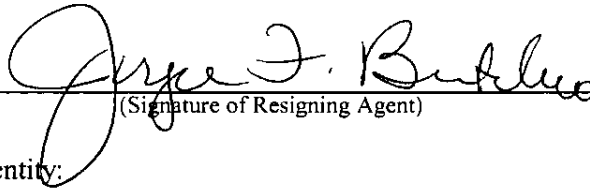
(Name of Corporation)

P96000078875

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

Joyce F. Bentubo

(Typed or Printed Name)

Secretary

(Capacity)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314