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	mendment Section Division of Corporation	S		
SUBJEC	P.CPLANTATION.	LLLP		
SUBJEC	Name of Lin	nited Partnership or Lim	ited Liab	ility Limited Partnership
DOCUM	IENT NUMBER: A05	500000918		<u>.</u>
The encl	osed Resignation of Ro	egistered Agent and	fee(s) ai	re submitted for filing.
Please re	turn all correspondence	e concerning this ma	itter to:	
Jeffrey A.	Deutch			
	Contact P	erson		-
Nelson M	ullins Riley & Scarborough	LLP		
	Firm/Con	npany		_
1905 NW	Corporate Boulevard, Suite	: 310		_
	Addre	ess		_
Boca Rate	on, FL 33431			
	City. State and	l Zip Code		_
Jeffrey.De	eutch@nelsonmullins.com			
E-ma	il address; (to be used for t	uture annual report notif	ication)	-
For furth	er information concern	ing this matter, plea	se call:	
Jeffrey A.	Deutch	at (·i	343-6960
Nam	e of Contact Person		a Code a	and Daytime Telephone Number
Enclosed	is a check made payal	ole to the Florida De	partmer	nt of State for:
□ \$87.50	Filing Fee] \$140.00 (\$87.50 Fili	ng Fee an	nd \$52.50 Certified Copy Fee)
Amendm Division P.O. Box	Address: nent Section of Corporations : 6327 see, FL 32314		Amend Division The Co 2415 N	Address: Iment Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

Pursuant to the provi	sions of section 620.1116, Florida Statu	utes, the undersigned.		
Jeffrey A. Deutch P.A		, hereby resigns as		
	Name of Registered Agent			
Registered Agent for	P.CPLANTATION, LLLP			
	Name of Limited Partnership or Limited	d Liability Limited Partnership		
A05000000918				
Florida Documen	Number, if known			
the Florida Departr	Signature of Registered A			
	leffrey A. Deutch P.A.	7: 22	 .	
-	Typed or Printed Nam	TALLAHAS		
	resident	TALLAWASS		
-	Capacity	A 8: 27		