

L13000013198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

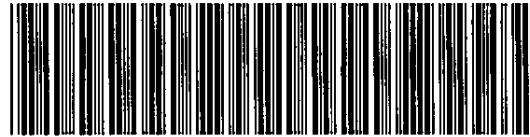
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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B. BOSTICK  
MAR - 6 2014  
CLERK

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PT CAPITAL INVESTMENT, LLC  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

CHARLES J. POUTHOS  
(Contact Person)

Mo  
(Firm/Company)

15245 Oaks Rd  
(Address)

CHARLOTTE HALL, MD. 20622  
(City/State and Zip Code)

For further information concerning this matter, please call:

CHARLES J. POUTHOS at ( 301 ) 643-0491  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OR DISSOCIATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: PT Capital Investment, LLC.

2. The Florida document/registration number of this limited liability company is:

L130000 13198.

3. The date this member withdrew or will withdraw is: 12-31-13

4. I, CHARLES J. POUTNASS, hereby resign as a PARTNER MGR  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

A handwritten signature in black ink, appearing to read "Charles J. Poutnass", is written over a horizontal line.

Signature of Resigning or Dissociating Manager, Member

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

2014-01-03 16:10:02  
2014-01-03 16:10:02  
2014-01-03 16:10:02