## FOGOWWYUS

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
DOM Haldings Line				
SUBJECT: PCIVI HOIGINGS I, INC.  (Name of Corpo	ration)			
DOCUMENT NUMBER: F06000004615	·······,			
The enclosed withdrawal application and fee are submitted	for filing.			
·				
Please return all correspondence concerning this matter to the following:				
Kim R. Hill				
(Name of Person)				
Legg Mason, Inc.				
(Firm/Company)				
100 International Drive, Corpo	rate Legal:			
(Address)				
Baltimore, MD 21202	*			
(City/State and Zip	code)			
For further information concerning this matter, please call:				
_	<sub>)</sub> 454-5419			
(Name of Person) (Area Enclosed is a check for the amount:	a Code & Daytime Telephone Number)			
\$35 Filing Fee \sum \$43.75 Filing Fee & \$43.75 Filing I Certified Copy (Additional continuous)  Certificate of Status (Additional continuous)	Certificate of Status & Certified			
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314	STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301			

## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

PCM Holdings I, Inc.	큄		
(Name of Corporation)	EC:A	ω ⊐:	energias.
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(Document Number of Corporation (if known)		E	
Delaware	STAT	Ю: 3	e mini
(Incorporated Under Laws of)	Þ. T	<del>- w</del> -	-
This corporation is no longer transacting business or conducting affairs within the State voluntarily surrenders its authority to transact business or conduct affairs in Florida.  This corporation revokes the authority of its registered agent in Florida to accept seappoints the Department of State as its agent for service of process based on a cause the time it was authorized to transact business or conduct affairs in Florida.	ervice o	n its l	behalf and
The following is a current mailing address for the corporation:			
8889 Pelican Bay Boulevard, Suite 500			_
Naples, Florida 34108			_
(City/ State /Zip)			

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

(Fignature of a director, president or other officer - if in the hands of a receiver or other count appointed fiduciary, by that fiduciary)

(Date)

Thomas C. Merchant

(Typed or printed name of person signing)

Secretary
(Title of person signing)