Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000166688 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SIMON & SIGALOS, LLP

Account Number: I19990000176 Phone : (561)447-0017 Fax Number : (561)447-0018

\*\*Enter the email address for this: business entity to be used for future annual report mailings. Enter: only one email address please. \*\*

Email Address: MS/Mon & SIMON SIGGIOS . COM

## LLC REGISTERED AGENT RESIGNATION PR-PCI, LC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

C. LEWIS

JUN 2 7 2011

**EXAMINER** 

Electronic Filing Menu

Corporate Filing Menu

Help

ID: #19646 Page 2 of 2

(((H11000166B8 3)))

2011 JUN 24 AM 7: 59

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED ADEAHASSEEFFLORIDA LIABILITY COMPANY

Pursuant to the provisions o	f section 608.416(2) or 608.509, I	lorida Statutes, the undersigned,
Lennie F Smith		, hereby resigns as
Nu	me of Registered Agent	,,
Registered Agent for	PF	-PCI, LC
	Name of Limited Liability Com	pany
L0200002	5836	
Document Number	r, if known	
		ted liability company at its last known address.
the agency is terminated an	the office discontinued on the 3	Ist day after the date on which this sustement is filed.
_	Signature of Ros	going Ageni
If signing on behalf of an en	tity:	
	Typed or Printed Na	7.0
	Capacity	

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

INH\$17 (08/05)

(((H11000166688 3)))