03000022257

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PłCK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

OR APP - 2 PM L: 118

J. BRYAN

APR - 3 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Investors of PC, L (Name of	Limited Liability Company)	
The enclosed member, managing member filing.	er or manager resignation and fee(s) are submitted for	r
Please return all correspondence concern	ning this matter to:	
Walter F. Kilgore		CI
(Contact Person)		
Investors of PC, LLC (Firm/Company)	•	na APR -2
(Firm/Company)		2
135 Heritage Lane		ng apr -2 PH 4: 00
(Address)		00
Madison, Al 35758		
(City/State and Zip Code)		
For further information concerning this n	natter, please call:	
Walter F. Kilgore	at (256) 783-4508	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payab \$25 Filing Fee	ole to the Florida Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	i aiiaiiasee, i ioiida 52514	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is: Inve	limited liability company as it ap estors of PC, 22C	pears on the records of the	e Florida Dep	artme	nt
2. This limited liab State of Flo	ility company was organized und orida	er the laws of:		08 APR	SECF SECF
3. The Florida document/registration number of this limited liability company is: L03000022257		is:	-2 PH	N OF CORPOR	
4. I, Barbara J. Hoyt (Print Name of Person Resigning)		, hereby resign as a Mer	mber (Print Title)	f: 03	OF STATE DRPORATIONS
of this limited liab resignation in wri	oility company and affirm the lim	ited liability company has	s been notified	d of m	y
Barbar	a O Hoest				
Signature of Resi	gning Member, Managing Memb	er or Manager			
Filing Fee:	\$25.00 (Required)		-		
Certified Copy:	\$30.00 (Optional)				