

LD5000002350

(Requestor's Name)

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(City/State/Zip/Phone #)

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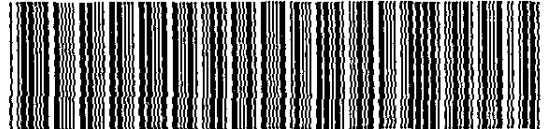
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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**HARRISON RIVARD
ZIMMERMAN & BENNETT**
ATTORNEYS AND COUNSELORS AT LAW

WILLIAM G. HARRISON, JR.
BO RIVARD
NEVIN J. ZIMMERMAN
DERRICK G. BENNETT

NICOLE RIVARD
CATHERINE S. HESTER
JULIAN BENNETT, OF COUNSEL

CHARTERED
PANAMA CITY, FLORIDA

P.O. BOX 12 32402
101 HARRISON AVENUE 32401
TEL (850) 769-7714
FAX (850) 769-7715

November 18, 2005

Amendment Section
Division of Corporations
409 E. Gaines St. (32399)
P.O. Box 6327
Tallahassee, Florida 32314


**Re: Resignation of Registered Agent
PCB DEVELOPMENT, LLC
Document #L05000002350**

Dear Sir/Madam:

The enclosed Transmittal Letter and Resignation of Registered Agent for a Limited Liability Company, and fee for \$85.00 is submitted for filing. Please return confirmation of its filing to the attention of the undersigned at P. O. Box 2422, Panama City, Florida 32402.

Should you have any questions or need any further information, please do not hesitate to advise. Thanks so much.

Very truly yours,



Derrick Bennett

DB:ce

Enclosures

Copies furnished to all parties of interest:

Mr. Michael Clancy, 285-C Highway 98 East, Destin, FL 32541

Mr. Trevor Shea, 455 Harrison Ave., Suite F, Panama City, FL 32401

Michael R. Leining, Esq., Dowd Law Firm, 285-A, Highway 98 East, Destin, FL 32541

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PCB DEVELOPMENT, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L05000002350

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DERRICK BENNETT
(Name of Person)

HARRISON, RIVARD, ZIMMERMAN & BENNETT, CH TD.
(Name of Firm/Company)

P.O. BOX 2422
(Address)

PANAMA CITY, FL 32402-2422
(City/State and Zip Code)

For further information concerning this matter, please call:

DERRICK BENNETT at (850) 769-7714
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

DERRICK BENNETT, hereby resigns as
(Name of Registered Agent)

Registered Agent for PCB DEVELOPMENT, LLC

(Name of Limited Liability Company)

L05000002350

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

DERRICK BENNETT

(Typed or Printed Name)

REGISTERED AGENT

(Capacity)

FILED
05 NOV 22 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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