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(Re	equestor's Name)			
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FILED SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	JECT: PRECISION CHARTE	RS, LLC
	(Name of Limite	d Liability Company)
The effling.		nanager resignation and fee(s) are submitted for
Please	e return all correspondence concerning th	is matter to:
ANE	DREW BARFIELD	
<u></u>	(Contact Person)	
PRE	ECISION CHARTERS, LLC	
	(Firm/Company)	
P.O.	. BOX 71851	
	(Address)	
ALB	ANY, GEORGIA 31708	
	(City/State and Zip Code)	
For fu	urther information concerning this matter,	, please call:
ANE	DREW BARFIELD	at (229) 343-6777 (Area Code & Daytime Telephone Number)
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclo	sed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
STRE	EET/COURIER ADDRESS:	MAILING ADDRESS:
	tration Section	Registration Section
	ion of Corporations	Division of Corporations
	n Building Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
	hassee, Florida 32301	ranunasco, riorida 325 r i

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as ECISION CHARTERS		s of the Florida Department
2. This limited liab FLORIDA	ility company was organized	under the laws of:	
3. The Florida docu L05000029	ument/registration number of 9239	this limited liability con	mpany is:
	ame of Person Resigning) oility company and affirm the		
Signature of Resi	gning Member, Managing M	lember or Manager	-
_	\$25.00 (Required) \$30.00 (Optional)		

CR2E079 (5/06)