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COVER LETTER

Division of Corporations				
		INVESTORS, LLC		
(Name of Lin	ited Liability Co	mpany)		
Dear Sir or Madam:				
The enclosed Resignation of Member, Managing	Member or M	Ianager and fee(s) are subr	mitted for filing.	
Please return all correspondence concerning this	matter to the f	following:		
DIANNE WARD				
(Name of Person)		_		
PENNSYLVANIA HOTEL INVES	STORS, LLC	_	2006 OCT 12 PM 12: 24 SECRETARY OF STATE TALLAHASSEE.FLORID	
(Firm/Company)			AST	5
2301 MAITLAND CENTER PKW	Y, #250		06 OCT 12 PM 12: 24 ECRETARY OF STATE LLAHASSEE.FLORIDA	
(Address)				
MAITLAND, FL 3275	1	•	Z4 NDA	
(City/State and Zip Code)	<u>- "</u>			
For further information concerning this matter, p	lease call:			
DIANNE WARD	at (_407	475-0800		
(Name of Person)	(Area Cod	e & Daytime Telephone N	lumber)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 323	as	
Enclosed is a check for the following amount:				
\$25 Filing Fee	\checkmark	\$55 Filing Fee &		
CD2E070 (8/05)		Certified Copy		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

ł,	STEVEN J. FAIRBANKS	, hereby resign as	MANAGER	
			(Title)	
of	PENNSYLVANIA HOTEL INVESTORS, LLC	;		,
	(Limited Liabil	ity Company)		
a limit	ed liability company organized under the la	ws of the State of FLC	ORIDA	,
and af	(Signature of resigning manager,		7 2	

FILING FEE IS \$25.00

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