

L05000051406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

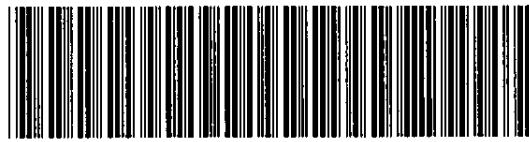
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MAY 18 2009

EXAMINER



000149020010

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09 MAY 19 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 MAY 19 AM 10:46
NOT INTENDED
TO ACKNOWLEDGE
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 999305 81390A

AUTHORIZATION : *Sgtellerman*

COST LIMIT : \$ 25.00

ORDER DATE : May 19, 2009

ORDER TIME : 10:28 AM

ORDER NO. : 999305-015

CUSTOMER NO: 81390A

DOMESTIC AMENDMENT FILING

NAME: PCU INVESTMENTS, LLC

EFFECTIVE DATE:

XX RESIGNATION OF MANAGER

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER'S INITIALS: _____





**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**

FILED
09 MAY 19 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

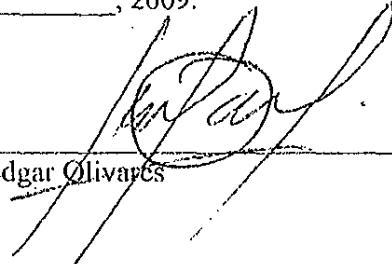
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

**PCU INVESTMENTS, LLC,
A FLORIDA LIMITED LIABILITY COMPANY
RESIGNATION OF MANAGER**

I, Edgar Olivares, hereby resign as Manager of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

DATED this 15 day of May, 2009.


Edgar Olivares