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(Re	equestor's Name)	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: PYC Development T (Name of Limited Liability Con	three LLC				
Dear Sir or Madam:					
The enclosed Resignation of Member, Managing Member or M	anager and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the fo	ollowing:				
OMAWALE OMAWALE (Name of Person)	 -				
(Firm/Company)	TALLAH TALLAH				
4555 W. IRLO BRONSON HWY (Address)	NARY C				
KISSIMMES FL 34746 (City/State and Zip Code)	2006 JAN 30 PM 2: 07 SECRETARY OF STATE FALLAHASSEE, FLORIDA				
For further information concerning this matter, please call:	·				
(Name of Person) at (HOT) 396-5100 (Area Code & Daytime Telephone Number)					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
\$25 Filing Fee	\$55 Filing Fee & Certified Copy				



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

	ALG OMA			(Title)	
of	1C DEVO	(Limited Liability Co	T TILE	eg, LLC	, ,
and affirm that th	company organize e limited liability c	ompany has been t	notified in writi	ing of the resign	

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