## L07000013918

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SECRETARY OF STATE STORY OF CORPORATIONS

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Partners Trust, LLC (Name of Limited Liabi	lity Company)
The enclosed member, managing member or manage filing.	er resignation and fee(s) are submitted for
Please return all correspondence concerning this mat	iter to:
Gordon Duncan	
(Contact Person)	ت
Duncan & Tardif, P.A.	07 APR -4 PH 1:5
(Firm/Company)	₹
PO Box 249	, PH
(Address)	•••
Fort Myers, FL 33919	. 5
(City/State and Zip Code)	<del></del>
For further information concerning this matter, pleas	e call:
Gordon Duncan at ( 2	239 334-4574
(Name of Contact Person) (Are	a Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florian Fee \$25 Filing Fee	orida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

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 rtners Trust, LLC	it appears on the records of the Fl	orida Department
2. This limited liab Florida	ility company was organized	l under the laws of:	SECRETARY OF STATION SECRETARION OF CORPORATION OF PM 1:5
3. The Florida docu L0700001391		f this limited liability company is:	OF SIATIONS REPORATIONS
4. I, Robert E	. Stintzi, II ame of Person Resigning)	, hereby resign as a Mana	nging Member
resignation in wr	iting.	e limited liability company has be  Member  Member or Manager	en notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		