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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PICY (AND COMMUNIS ((C (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
PARICK E LAW GFT ELM (Contact Person)
(Firm/Company)
2718 NW 10Th CAYY
CAPL CYAL TO 33993 (City/State and Zip Code)
For further information concerning this matter, please call:
PHILLE at (239) 265-2814 all Mort. (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company a: IET LANG COMP		ords of the Florida Departm	ent _·
2. This limited liab	ility company was organize	d under the laws of:		
3. The Florida docu	ument/registration number of DOCOLTGGI	of this limited liability	company is:	
4. I, Print N	ELAW(NFEW) Tame of Person Resigning)	, hereby resign a	(Print Title)	
of this limited liairesignation in wr		he limited liability con	npany has been notified of r	ny
Signature of Resi	gning Member, Managing I	Member or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		TON OCT -3 PM 2: 52 LELANDER OF CHAPE OF LOAD AND SEE, FLOWER	

CR2E079 (5/06)