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SECRETARY OF STATEMENT OF OFFICE OR OF CORPORATION

J. BRYAN

DEC - 2 2008

EXAMINER

COVER LETTER

Division of Corporations SUBJECT: PMA INTERNATIONAL HOLDINGS, LLC (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: Denis Fishman, Esq. (Contact Person) Law Offices of Denis Fishman, LLC (Firm/Company) 2999 N.E. 191st Street, Ste. 603 (Address) Aventura, FL 33180 (City/State and Zip Code) For further information concerning this matter, please call: at (305) 931-9355 (Area Code & Daytime Telephone Number) Denis Fishman (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$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 32314

CR2E079 (5/06)

Tallahassee, Florida 32301

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it a		of the Florida De	partment
2. This limited liabili Florida	ty company was organized ui	nder the laws of:		08 DEC -1
3. The Florida docum	nent/registration number of th	is limited liability com	npany is:	18 OEC -1 PH 2: 44
_{4. I,} Juzef Yakobi		, hereby resign as a	Manager	
(Print Name of Person Resigning)		,,	(Print Title)	
of this limited liabil resignation in writing	lity company and affirm the ling.	imited liability compar	ny has been notifie	d of my
Signature of Resign	ning Member, Managing Men	nber or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			