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SECRETARY OF SIME

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: MCT Investments (Name of Limited Liability)	Company)
The enclosed member, managing member or manager refiling.	signation and fee(s) are submitted for
Please return all correspondence concerning this matter	o:
Christopher Tracy (Contact Person)	····-
(Firm/Company)	<del></del>
(Firm/Company)	
9731 Chastrut Ridge Dr. (Addiess)	
(Address)  Windermere F1 34786  (City/State and Zip Code)	<u></u>
For further information concerning this matter, please ca	ıll:
(Name of Contact Person) (Area C	256-5119
(Name of Confact Person) (Area C	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid	a Department of State for:
S25 Filing Fee	□ \$55 Filing Fce &
	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



## 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 MCT Investments	it appears on the records of	of the Florida Department
	ility company was organized		
Florida			
	ment/registration number of 63 298		pany is:
4. I, <u>Jeanin</u> (Print N	e T(a y ame of Person Resigning)	, hereby resign as a _	MGR (Print Title)
of this limited lial resignation in wri	oility company and affirm the iting.	e limited liability company	y has been notified of my
Signature of Resi	gning Member, Managing M	lember or Manager	شن
	\$25.00 (Required) \$30.00 (Optional)		HILL 13 JUL-8 / SECRETARY ( ALLAHASSEL