L09000064918

Office Use Only



200161226222

10/05/09--01004--021 **25.00



OCT - 6 2009 **EXAMINER**

COVER LETTER

Division of Corporations	
SUBJECT: PMRSD, LLC (Name of Limited L.)	iability Company)
The enclosed member, managing member or man filing.	
Please return all correspondence concerning this	matter to:
Marilyn Bennett, Esq.	
(Contact Person)	
CHASE FREEMAN	
(Firm/Company)	
250 International Parkway, Suite	= 330
(Address)	
Lake Mary, FL 32746	<u> </u>
(City/State and Zip Code)	
For further information concerning this matter, p	lease call:
Marilyn Bennett, Esq. at (407 333-7337
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	e Florida Department of State for: \$55 Filing Fee &
\$25 Filing Fee	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	, , ,

CR2E079 (5/06)



FILED

2009 OCT -5 PM 29 43

SECRETARY OF STATE TALLAHASSEE. FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is: PN	limited liability company as i	t appears on the records of th	ne Florida Department
2. This limited liab FLORIDA	ility company was organized	under the laws of:	•
3. The Florida doci	nment/registration number of 64918	this limited liability company	y is:
· ,	TORNATORE ame of Person Resigning)	, hereby resign as a MC	GR (Print Title)
of this limited lial resignation in wr	oility company and affirm the		,
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)		