## 09000105824

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J. BRYAN

AUG 1 9 2011

**EXAMINER** 

## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations	
SUBJECT: PURE PERFORMAN	CE CYCLES LLC
(Name of Li	imited Liability Company)
The enclosed member, managing member filing.	or manager resignation and fee(s) are submitted for
Please return all correspondence concerning	ng this matter to:
Dan Barychko	
(Contact Person)	
Pure Performance Cycles LLC	1 AUG ECRET
(Firm/Company)	AR)
2860 W,State Road 84 , Suite 1	AUG 18 PM 1: 23  ECRETARY OF STATE- LAHASSEE, FLORID,  16-262
(Address)	TATE ORI
Fort Lauderdale , FL, 33312	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
Dan Barychko	at ( 954 ) 501-3163
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$\sqrt{\sqrt{\sqrt{\chi}}}\$25 Filing Fee	
	Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301

TO:



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	nited liability company as it is PERFORMANCE C		s of the Florid	la Departn	nent —·
2. This limited liability FLORIDA, US	y company was organized ur	nder the laws of:			
3. The Florida docume L090001058	ent/registration number of th	is limited liability cor	mpany is:		
4. I, lan West  (Print Name of Person Resigning)  of this limited liability company and affirm the l resignation in writing.		_, hereby resign as a mited liability compa	(Print	·	— my
	ing Member, Managing Men	nber or Manager	, E		
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)			AUG 18 PH 1:29 CRETARY OF STATI	FILED