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(Requestor's Name)					
(Address)					
(Add	lress)				
(City	/State/Zip/Phone	<u> </u>			
(Oity	rotate/2ip/r none	<i>,</i>			
PICK-UP	 WAIT	MAIL			
(Bus	iness Entity Nar	ne)			
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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: PLANT CITY HOLDIN	G COMPANY, L.L.C.		
(Name of Lim	nited Liability Company)		
The enclosed member, managing member of filing.	r manager resignation and fee(s) are submitted for	г	
Please return all correspondence concerning	this matter to:		
James R. Connors			
(Contact Person)			
PLANT CITY HOLDING COMPA	NY, L.L.C.		
(Firm/Company)			•
1380 N. Courtenay Parkway			
(Address)		28	
Merritt Island, FL 32953		2012 WR 16	·}
(City/State and Zip Code)		<u></u>	e manufacture (Manufacture)
For further information concerning this matter	er, please call:	900 1131 1131 1131	17
James R. Connors	at (321) 452-0011	:: 0 @	E
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	14,43	
Enclosed please find a check made payable t \$25 Filing Fee	to the Florida Department of State for: \$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 32301	Tallahassee, Florida 32314		

CR2E079 (5/06)



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		ne Florida Department	
2. This limited liabili Florida	ty company was organized ur	nder the laws of:		
3. The Florida docum	nent/registration number of th	is limited liability company	y is:	
4. I, James K. G	uldi ne of Person Resigning)	_, hereby resign as a Ma	nager (Print Title)	
	ity company and affirm the li			
Garris	Medely ning Member, Managing Mem		2012 th Secretary	i Pau
Signature of Resign	ing Member, Managing Men	nber or Manager	AR 16	The same
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		AM II: 0 FLORID	