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(Re	equestor's Name)			
(Ac	ddress)			
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(Ĉi	ty/State/Zip/Phon	e #)		
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2019 AUG 28 FM 12: 05

J. SAULSBERRY EXAMINER

AUG 28 2013

COVER LETTER

CR2E079 (5/06)

TO: Registration Section Division of Corporations					
SUBJECT: PC Goiders LLC					
(Name of Limited Liability Company)					
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for				
Please return all correspondence concerning this matter to:					
George Bunnersheim (Contact Person)	-				
PC Guides LLC (Firm/Company)	5. -				
(Firm/Company)	<u>₩</u>				
1934 Nena Hills Or (Address)	-				
	* **				
Tallaharsee FC 32304 (City/State and Zip Code)					
(City/State and Zip Code)	⁵⁶ €				
For further information concerning this matter, please call:					
Corge Bonnesho M at (941 (Name of Contact Person) (Area Code	915 1863				
(Name of Contact Person) (Area Code	& Daytime Telephone Number)				
Enclosed please find a check made payable to the Florida D \$25 Filing Fee	Department of State for: S55 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	,				



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 PC Chulders		of the Florida Dep	artment
	ility company was organized	under the laws of:		
•	ment/registration number of	this limited liability comp	oany is:	
4.1, George	Sommersheim ame of Person Resigning)	, hereby resign as a	Managerg (Print Title)	Member
of this limited lial resignation in wri	oility company and affirm the ting.	limited liability company	y has been notified	l of my
,	gning Member, Managing M	ember or Manager	The state of the s	28/3 AUG 28
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		Constant News	Priz 0