#112000098114

(Requestor's Name)				
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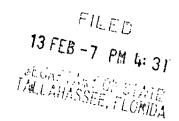
K.SALY EXAMINER FEB - 8 2013

COVER LETTER

	ation Section n of Corporations		·
SUBJECT: P	C AND ASSOCIATES (Name of Limited		
The enclosed m filing.	ember, managing member or ma	inager resig	nation and fee(s) are submitted for
Please return al	l correspondence concerning this	s matter to:	
Pedro Pavo			-
	(Contact Person)		
	(Firm/Company)		
11610 SW			
Mlami, FL 3			
For further info	(City/State and Zip Code) rmation concerning this matter,	please call:	
Pedro Pavo	on at e of Contact Person)	305	482-1802 & Daytime Telephone Number)
•	e find a check made payable to the \$25 Filing Fee	ne Flor <u>ida</u> D	
STREET/COU Registration Se Division of Cor Clifton Building 2661 Executive Tallahassee, Flo	porations g • Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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

	limited liability company as AND ASSOCIATES		
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doc L12000098	ument/registration number of 3114	this limited liability con	mpany is:
4. I, Pedro Pay	ON Jame of Person Resigning)	, hereby resign as a	Manager (Print Title)
,	bility company and affirm the		(
Signature of Res	gning Member, Managing M	lember or Manager	
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)		