## L1300001011

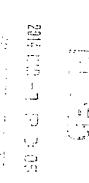
(Requ	uestor's Name)	)		
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PICK-UP	☐ WAIT	MAIL.		
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Certified Copies	Certificate	es of Status		
Special Instructions to Fi	ling Officer:			

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B. BOSTICK
MAR 1 0 2014
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: PB Repairs LLC	
(Name of Limited Liability	ty Company)
The enclosed member, resignation or dissociation and	fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to:
Nicole Evasius	
(Contact Person)	
PB Repairs LLC	
(Firm/Company)	
2655 N Ocean Drive Suite 203	
(Address)	
Riviera Beach, FL 33404	1
(City/State and Zip Code)	
For further information concerning this matter, please	call:
Nicole Evasius 561	8414747
(Name of Contact Person) (Area	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flor  □ \$25 Filing Fee  ■ \$55 I	rida Department of State for: Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (2/14)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is: PB		as it appears on the records of the Florida Departmen	nt -·
2. The Florida doct L130000170	•	of this limited liability company is:	
3. The date this me	mber withdrew or will with	ndraw is: 12/31/2013	-
4. I. MCG Mana	gement LLC	, hereby resign as a MGMR	
	ame of Person Resigning)	(Print Title)	-
resignation in wr		he limited liability company has been notified of m	١ <b>y</b>
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	· 公司	* : * 