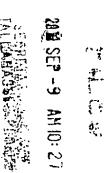
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COVER LETTER

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TO: Registration Section	
TO: Registration Section Division of Corporations	
	200
SUBJECT: PP Capital Holdings, LLC	
Name of Limited Liability (Company
DOCUMENT NUMBER: L17000112561	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	: following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
101 North Brand Blvd. 11th Floor	
Address	
Glendale, CA 91203	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
 at ()	773-0888 x3950
Name of Person Area Code	Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes.	the undersigned
United States Corporation Agents, Inc.	
Name of Registered Agent	, hereby resigns as
Registered Agent for PP Capital Holdings, LLC	
	2
Name of Limited Liability Compan	y The state of the
L17000112561	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited. The agency is terminated and the office discontinued on the 31st	
Signature of Resignin	ng Agent
If signing on behalf of an entity:	
Cheyenne Moseley	
Typed or Printed Name	
Asst. Secretary for United States Corpor	ration Agents, Inc.
Capacity	

FILING FEES:

Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314