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**EXAMINER** 



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## **COVER LETTER**

J

Division of 0					
SUBJECT: PCPN	MG, LLC				
	(Name of For	reign Limited Liability C	Company)		
Dear Sir or Madam:					
The enclosed withdra	wal and fee(s) are submitte	ed for filing.			
Please return all corre	spondence concerning this	matter to the following	:	MIL	2011
Robert J. Riek					2011 MAY 26
	(Name of Person)			SECTION	
Preferred Care,	Inc.				PH 3: 11
	(Firm/Company)			Tie-	=
5420 W Plano F	Parkway				
	(Address)				
Plano, TX 7509	3				
	(City/State and Zip Cod	e)			
For further information	n concerning this matter, p	blease call:			
Cheryl Engle		/ WE \/	930-8156		
(Nai	ne of Person)	(Area Code &	Daytime Telephone Number)		
Registration Division of C Clifton Build 2661 Execut	Corporations	Registr Divisio P.O. Bo	ation Section n of Corporations ox 6327 ssee, Florida 32314		
Enclosed is a check f	or the following amount:				
☑ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status &		

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

PCPMG, LLC		OF S
	(Name of limited liability company)	ma p
Texas		<u> </u>
	(Jurisdiction of its organization)	
M0800004127		<u>-</u>

(Florida Document Number)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

5420 W Plano Parkv	vay	
	(Mailing address)	-2 -00
Plano, TX 75093		
	(City/State/Zip)	

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

(Signature of member or authorized representative of a member)

Mike Tennyson, Manager

(Typed or printed name of signee)

Filing Fee: \$25.00