Page: 02/10/2022 06:12 AM TO:18506176383 FROM:5612934213

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000054296 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP

Email Address: CUSTOMER OABKCORP. COM

Account Number: I20120000055 Phone : (407)898-1757 Fax Number : (407)897-5336

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN .

DML PROPERTY INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

T. LEMIEUX

Page: 3 02/10/2022 06:12 AM TO:18506176383 FROM:5612934213 H220000542963

COVER LETTER

_	stration Section ion of Corporations				
DML PROPERTY INVESTMENTS LLC					
SUBJECT:	(Name of Lin	nited Liability Cor	mpany)		
The enclosed	l member, resignation or dissoc	iation and fee(s	s) are submitted for filing.		
Please return	all correspondence concerning	this matter to:			
	JOSE A LEMUS				
	(Contact Person)		_		
	ACCOUNT BOOKKEEPING COR	LP.			
	(Firm/Company)		_		
	5301 CONROY RD STE 140				
	(Address)		_		
	ORLANDO FL 32811				
	(City/State and Zip Code)				
For further in	nformation concerning this mat	ter, please call:			
	JOSE A LEMUS	407 at (898-1757)		
(N	anie of Contact Person)	(Area Code	& Daytime Telephone Number)		
Enclosed ple	ase find a check made payable g Fee		Department of State for: g Fee & Certified Copy		
Regis Divis	ng Address: Stration Section Jion of Corporations Box 6327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee		

CR2E079 (2/14)

Tallahassec, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Page: 4 02/10/2022 06:12 AM TO:18506176383 FROM:5612934213



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as i	t appears on the records of the F	Torida D	epartment
2. The Florida docu		igned to this limited liability cor	mpany is	:: :
3. The date this me	mber/manager withdrew/resig	gned or will withdraw/resign is: _	12/30/2	2021
10.10.1100.0	UL LONGIL OLONGALIA	, hereby withdraw/resign as		
	GR (Print Title)			
resignation in wr		limited liability company has be		ied of my
			· · · · · · · · · · · · · · · · · · ·	F
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			