L05 000086223

(Requestor's Name)

_____

(Address)

_____

(Address)

_____

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____

(Business Entity Name)

L05 - 86223

(Document Number)

Certified Copies _____   Certificates of Status _____
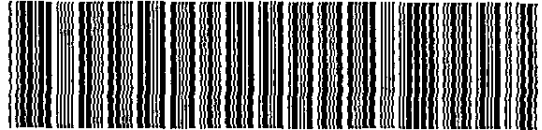
Special Instructions to Filing Officer:

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06 JAN -5 PM 1:50

COVER LETTER

TO: Registration Section
           Division of Corporations

SUBJECT: **Dream Development & Construction, LLC**

                      (Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Billy Richter

                    (Name of Person)

Dream Development & Construction, LLC

                    (Firm/Company)

8610 SW 44th Street

                    (Address)

Ocala, Fl 34481

                    (City/State and Zip Code)

For further information concerning this matter, please call:

Billy Richter   at (**352**) **239-5333**

        (Name of Person)   (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS: **MAILING ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
Clifton Building   P.O. Box 6327
2661 Executive Center Circle   Tallahassee, Florida 32314
Tallahassee, Florida 32301

Enclosed is a check for the following amount:

☑ $25 Filing Fee   ☐ $55 Filing Fee &
                                             Certified Copy

CR2E079 (8/05)

FLORIDA DEPARTMENT OF STATE
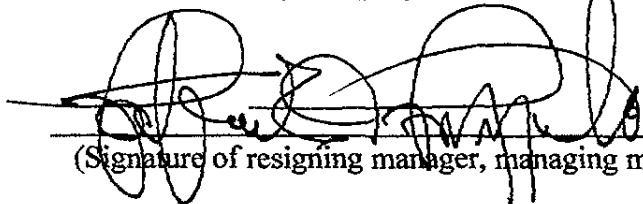DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, PATRICK A. PIZZULO   , hereby resign as Vice-Operating Mgr & Treasurer

(Title)

of Dream Development & Construction, LLC   ,

(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida   ,

and affirm that the limited liability company has been notified in writing of the resignation.

(Signature of resigning manager, managing member or member)

06 JUN -5 PM 1:50 FILED

FILING FEE IS $25.00

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

CR2E079 (8/05)