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SECRETARY OF STATE
AND AHASSEE FLORIDA

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enter a second	COVER	RLETTER		50
TO: Registration Section Division of Corporation			nd Ne Carle	ទ ខាត់ ១០ ១១ភ
SUBJECT: BDC Pro	perties, LLC			_
	(Name of Limited	Liability Company)	•	
The enclosed member, ma filing.	naging member or m	anager resignatior	and fee(s) are submitt	ted for
Please return all correspon	dence concerning thi	is matter to:		
Harvey M. Alper, E	<u> </u>			
(Con	act Person)			
Law Offices of Harv	ey M. Alper			
(Firm	(Company)	 		
Post Office Box 162	.967			
. (Ac	ldress)		•	
Altamonte Springs,	FL 32716-2967	•		
(City/Stat	e and Zip Code)			
For further information cor	cerning this matter,	please call:	•	
Harvey M. Alper, Es	quire at	<u>407</u> 869	9-0900	
(Name of Contact	Person)	(Area Code & Day	time Telephone Number)
Enclosed please find a chec	k made payable to th	ne Flor <u>ida</u> Departn	nent of State for:	
✓ \$25 Filin	g Fee		ing Fee &	
		Cert	ified Copy	
STREET/COURIER ADI	DRESS:		ING ADDRESS:	
Registration Section		—	ration Section	
Division of Corporations			on of Corporations	
Clifton Building 2661 Executive Center Circ	مار مار		Box 6327	
Tallahassee, Florida 32301		ı ailan	assee, Florida 32314	

CR2E079 (5/06)



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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	the limited liability company as DC Properties, LLC	it appears on the records of the Florida Department
2. This limited I	iability company was organized	under the laws of:
3. The Florida d L 020000	_	this limited liability company is:
_{4. I.} Donna R. Best		, hereby resign as a MGRM
(Print Name of Person Resigning)		(Print Title)
of this limited in resignation in v		e limited liability company has been notified of my
_Dan	n R. Boot	
Signature of Ronna R.	esigning Member, Managing M Best	ember or Manager
Filing Fee:	\$25.00 (Required)	

\$30.00 (Optional)

Certified Copy: