10300038753

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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2006

ANASTASIAS TOM SPYREDES SIMON, SIGALOS & SYREDES, P.A. 120 EAST PALMETTO PARK RD., STE 100 BOCA RATON, FL 33432

SUBJECT: D.G., LLC

Ref. Number: L03000038753

We have received your document for D.G., LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Document Specialist Theast tipe

Letter Number: 206A00026570

TRANSMITTAL LETTER

SUBJECT: D.G. LLC
(Name of Limited Liability Company) DOCUMENT NUMBER: L-03000038753
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Anastasios Tom Soyredes (Name of Person)
Simon, Sigalos & Spyrecks, 1.A. (Name of Firm/Company)
120 East Palmetto Park Road, suite 100
Boca Reton, Florida 33432 (City/State and Zip Code)
For further information concerning this matter, please call:
Morrica Miller at (561) 447-0017 (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

INHS17(11/02)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 608.416((2) or 608.509, Florida	a Statutes, the undersigne	:d,	
Simon, Sigal	os & Spyred	les, P.A.	, hereby resigns as		
	(Name of Registered Age	nt)	,		
Registered Agent for	D.G. LL	.C		·	
	(Name of Lin	nited Liability Company)			
L0300003	875 <i>3</i>				
(Document Num	ber, if known)				
	d and the office discor		ability company at its last by after the date on which		
If signing on behalf of a	n entity: Anastasia Vice Pr	yped or Printed Name) (ESICLE 1+ (Capacity)	iredes	06 APR 19 AMII: 49 SECRETARY OF STATI TALLAHASSEE, FLORI	FILED

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

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