L0500002660

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name) LOS - 2 LO ((Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





500242400905

12/10/12--01014--008 **35.00

FILED PEC 28 PH 2:

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DPR Limit (Name of Limite)	d LLC d Liability Company)
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning the	is matter to:
Donna M. Lelson	
(Contact Person)	
(Firm/Company)	
2937 5w 27 (Address)	Are \$706
Mione FL 331	
(City/State and Zip Code)	35
For further information concerning this matter,	please call:
archael Hersch	u 305 570-3606
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t	
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	•

CR2E079 (5/06)



December 13, 2012

RICHARD HERSCH 12240 SW 65 AVENUE MIAMI, FL 33156

SUBJECT: DPR LIMITED, LLC Ref. Number: L05000002660

We have received your document for DPR LIMITED, LLC and your check(s) totaling \$35.00. 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.

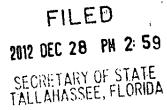
If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 712A00029468

Neysa Culligan Regulatory Specialist II

www.sunbiz.org





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the	limited liability company as i	it appears on the records of	the Florida Department
01 State 13			· · · · · · · · · · · · · · · · · · ·
2. This limited liab	ility company was organized	under the laws of:	
<i>F</i>	10.184	'	
	ument/registration number of		ny is:
4. I, Richa.	d Hers ch Jame of Person Resigning)	, hereby resign as a	langing Mamba (Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability company l	nas been notified of my
Signature of Res	igning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		