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(Requestor's Name)		
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(Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	Certificates o	f Status
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Special Instructions to Filing Officer:		
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Office Use Only



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SECRETARY OF STATEA

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Dennis Bedard	, hereby resign as Managing Member (Title)
of DB Bentley LLC (Limited Liability)	ty Company)
a limited liability company organized under the law and affirm that the limited liability company has be (Signature of resigning manager, 1)	een notified in writing of the resignation CRETARY

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