

W05000107649

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W05-107649
CL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Del Ponticello
(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:

G. Robert Breeden
(Name of Person)

Del Ponticello, LLC
(Firm/Company)

417 12th Street W. #109
(Address)

Bradenton, FL 34205
(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

G. Robert Breeden at (941) 650-6590
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Paul L. D. Stefano, hereby resign as Managing Member
(Title)
of Del Ponticello, 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

Paul L. D. Stefano

(Signature of resigning manager, managing member or member)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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