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(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
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(Ci	ty/State/Zip/Phone	∌ #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Cunnial lunturations to	Filing Officer	
Special Instructions to	Filing Officer:	
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Office Use Only



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SEURETARY OF STATE
TALLAHASSEF, FLORID

COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: DH - Sinclair, LLC	
(Name of Limited	Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Wendy Ann Hoffmann	
(Contact Person)	
(Firm/Company)	
7919 FLA Boys Ranch Rd	
(Address)	
Groveland, FL 34736	•
(City/State and Zip Code)	
For further information concerning this matter, p	slease call
To further information concerning this matter, p	nease can.
Wendy Hoffmann	₍ 352 ₎ 429-2303
	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th	e Florida Department of State for
\$25 Filing Fee	\$55 Filing Fee &
V 1 1 1 1 1 1 1 1 1 1	Certified Copy
CTDEET/COLDIED ADDRESS.	MAIL INC. ADDDECC.
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	rananassee, 1 mina 32314

CR2E079 (5/06)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as - Sinclair, LLC	it appears on the records	s of the Florida Department
2. This limited liab	ility company was organized	d under the laws of:	
3. The Florida docu <u>L07000037</u>	ument/registration number o 7391	f this limited liability con	npany is:
4. I, Russell S.	Hoffmann	, hereby resign as a	President/Manager/Member
· — — — — — — — — — — — — — — — — — — —	ame of Person Resigning)		(Print Title)
resignation in wr	pility company and affirm the iting. gning Member, Managing N		ny has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		