L07000089211

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
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C. LEWIS

JAN 0 5 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: D+H INVESTM (Name of Limited Liabil	ity Company)	Tallahassee LLC
The enclosed member, managing member or manage filing.	r resignation and fee(s) are	submitted for
Please return all correspondence concerning this matt	ter to:	•
James F. Heidenreich (Contact Person)	<u>h</u>	
D+H Investments of To (Firm/Company)	allahassee, Li	LC
8511 Bull Headley Rd.,	Suite 200	
Tallahassee FL 32 (City/State and Zip Code)	312	
For further information concerning this matter, please	e call:	
James F. Heidenreich at (8 (Area (Area))	50 599-61 a Code & Daytime Telephone	Number)
Enclosed please find a check made payable to the Flo	\$55 Filing Fee & Certified Copy	or:
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRE Registration Section Division of Corporat P.O. Box 6327 Tallahassee, Florida	tions
CR2E079 (5/06)		



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ECRETARY OF STATE
VALLARIASSEE PLORIBA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

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1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: D&H Investments of Tallahassee, LLC.
2. This limited liability company was organized under the laws of:
<u>Florida</u>
3. The Florida document/registration number of this limited liability company is:
L07000089211
4. I, David W. Dowdy, hereby resign as a Managing Member (Print Name of Person Resigning), hereby resign as a Managing Member
(Print Name of Person Resigning) (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Contain W. Soly
Signature of Resigning Member, Managing Member or Manager
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

CR2E079 (5/06)