

L08000025963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

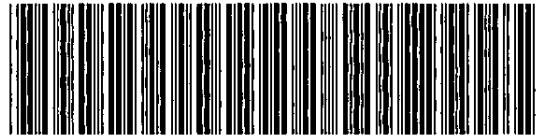
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAR 17 PM 2:01

NGRAM
RESIGN.

B. Tadlock MAR 21 2008

3/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACDZ LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Jeffrey DeCristofaro

(Contact Person)

ACDZ LLC

(Firm/Company)

6428 123rd Ave N, Unit 17

(Address)

Largo, FL 33773

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey DeCristofaro

(Name of Contact Person)

at (727) 688-1048

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

08 MAR 07 PM 2:01
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: ACDZ LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L08000025963

4. I, Thomas Zakarka, hereby resign as a MGRM
(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.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)