## B003257

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

G. MCLEOD

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**EXAMINER** 



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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: B3 Advertising 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:
Steve DumonT
(Firm/Company)
575 Oaks Lane #310
Pompano Beach, FL 33069 (City/State and Zip Code)
For further information concerning this matter, please call:
Steve Dymon at (954) 560-1670 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$  Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations  MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	imited liability company as it 330 Adver		of the Florida Dep	artme	nt
		J.			-
2. This finited habit	lity company was organized u				
3. The Florida docur	ment/registration number of the DDDD9257	nis limited liability com	pany is:		
4. I, Ster	DUMONT me of Person Resigning)	, hereby resign as a _	Manage (Print Title)	2R	-
of this limited liabi resignation in writ	ility company and affirm the ling.	imited liability compan	y has been notifie	d of m	ıy
Sher	Det				
Signature of Resig	ning Member, Managing Me	mber or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		BEÜRETAK ALLAHASS	12 OCT -8	wanten
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