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SECRETARY OF STATE

J. BRYAN

OCT 26 2012

EXAMINER

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: DG OAK Hill (Name of Limited)	Liability Company)	
(Nume of Emmed	Elaonity Company)	
The enclosed member, managing member or mafiling.	nager resignation and fee(s) are submitted for	
Please return all correspondence concerning this	s matter to:	
Greg Johes (Contact Person)		
(Contact Person)		
(Firm/Company)	ALEC 70	
• • •	OCT 25 LAHASS	
157 Lake Aluma dr. (Address)	55 S	
(Address)	me 7	
OKlahoma City, OK	ZBIZ OCT 25 PM 1: 33 TALLAHASSEE, FLORIDA 77/2/	
(Chy/State and Zip Code)		
For further information concerning this matter, p	please call:	
(Name of Contact Person) at	(405, 550-2266	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the \$25 Filing Fee	se Florida Department of State for: \$55 Filing Fee &	
	Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	

CR2E079 (5/06)

Tallahassee, Florida 32301



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	• -	s of the Florida Departmen	at
2. This limited liab	ility company was organized	d under the laws of:		
	ument/registration number o	f this limited liability con	npany is:	
4. I,	Johes Jame of Person Resigning)	, hereby resign as a	MGRM (Print Title)	
resignation in wr	John Marie M		ny has been notified of my	y
Signature of Resi	gning Member, Managing N	Member or Manager	J	
	\$25.00 (Required) \$30.00 (Optional)		ZMIZ OCT 25 PM SECRETARY OF TALLAHASSEE, F	