## - L100000394169

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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(Business Entity Name)			
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## **COVER LETTER**

Division of Corporations	
SUBJECT: Installations By Dine	o, LLc
(Name of	Limited Liability Company)
The enclosed member, managing member filing.	er or manager resignation and fee(s) are submitted for
Please return all correspondence concern	ning this matter to:
Dino Cubero	
(Contact Person)	·
Installations By Dino, Ilc	
(Firm/Company)	
1435 w, Busch blvd	
(Address)	-
Tampa Fl, 33612	
(City/State and Zip Code)	
For further information concerning this n	natter, please call:
Dino Cubero	at ( 813 ) 7708784
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payab	ole to the Florida Department of State for:  √ \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 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 tallations By Dino, LL		s of the Florida Department		
2. This limited liab	oility company was organized	d under the laws of:			
3. The Florida doc L1000003	ument/registration number of	f this limited liability con	npany is:		
<sub>4. I,</sub> Dania I, Perez		, hereby resign as a	, hereby resign as a Manager		
(Print N	lame of Person Resigning)		(Print Title)		
of this limited lia resignation in wr	bility company and affirm th	e limited liability compar	ny has been notified of my		
Signature of Res	igning Member, Managing M	lember or Manager			
	\$25.00 (Required) \$30.00 (Optional)		12 APR		