

K. SALLY
EXAMINER
NOV 29 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D & C ROOFING & REPAIRS PLUS 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:

WAYNE K. EKREN, ESQ.

(Contact Person)

EKREN LAW, P.A.

(Firm/Company)

9330 Regency Park Blvd

(Address)

Port Richey, FL 34668

(City/State and Zip Code)

For further information concerning this matter, please call:

Wayne K. Ekren, Esq.

(Name of Contact Person)

at (727) 845-0700

(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



FILED
11 NOV 28 PM 5: 27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: D & C ROOFING & REPAIRS PLUS 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:
L11000001708

4. I, CHRIS GINO, 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.

Christene Gino

Signature of Resigning Member, Managing Member or Manager

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