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12 JAN 20 PM 1:43

BECRETARY OF STATE
ALLAHASSEE. FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Damost LLC (Name of Limited Lia	bility Company)
The enclosed member, managing member or managing.	ger resignation and fee(s) are submitted for
Please return all correspondence concerning this m	atter to:
Darval Carter (Contact Person)	
Darvell Carter (Contact Person) Damost LLC (Firm/Company)	
2902 Eagle Preserve BIV	10
Jackson VIIIe, FL 32226 (City/State and Zip Code)	
For further information concerning this matter, plea	ase call:
Name of Contact Person) at (A	rea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the I \$25 Filing Fee	Florida Department of State for: \$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

CR2E079 (5/06)



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 li	imited liability company	as it appears on the records of the Fl	orida Department	
of State is:	Damost	LLC		
2. This limited liabil	ity company was organiz	ed under the laws of:	12 JAN 20 SECRETARY TALLAHASSE	
	nent/registration number	of this limited liability company is:	C.F. CRIME	
4. I, Johnny (Print Nar	D Carler me of Person Resigning)	, hereby resign as a (P)	arager	
of this limited liabi resignation in writi		the limited liability company has been	en notified of my	
Q	well Calo			
Signature of Resigning Member, Managing Member or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	fest busines 12/31-26 pos puase make	o of abole, a ebolitude	
		12/31/11	(عمل)	