L13000027292

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(Re	questor's Name)		
(Ad	dress)		
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(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
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(Do	cument Number	<u></u>	
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Certified Copies	Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:		
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Office Use Only



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2013 MAR 25 PM NO.1
SECRETARY OF STATE
TALLAHASSEF, FINANCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DALTAM 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:

benfeld@bellsouth.net

(Contact Person)

(Firm/Company)

2655 Lejeune Rd Ste 514

(Address)

Coral Gables FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

Bennett Feldman

,,,305 4459909

(Name of Contact Person)

(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

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 of State is: DAI	• • •	appears on the records of the Flo	orida Department
	ility company was organized u	under the laws of:	SECRETARY O
3. The Florida docu L130000272		his limited liability company is:	PN & O'I OF STATE E. FLORIDA
4. I, BENNETT		, hereby resign as a MANAGER	
	ame of Person Resigning) bility company and affirm the	(Pr limited liability company has bee	rint Title)
Signature of Resi	TS Ollungning Member, Managing Me	ember or Manager	
-	\$25.00 (Required) \$30.00 (Optional)		