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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DIXON (var) ev Sales 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:
William Diwn (Contact Person)
DIXON Kravler Sales LLC (Firm/Company)
12879 SW 56th Tev (Address)
Ocala Fh 34473 (City/State and Zip Code)
For further information concerning this matter, please call:
William Dixon at (148) 147-9870 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sim \frac{1}{2} \\$25 \text{Filing Fee} \square \frac{1}{2} \\$55 \text{Filing Fee & Certified Copy}
STREET/COURIER ADDRESS: Registration Section 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 it appears on the records of the Florida Department Sales LLC.
	lity company was organized under the laws of:  OF FIDE ICA.
	ment/registration number of this limited liability company is:
4. I, \(\frac{1100 \text{ (Print N)}}{(Print N)}	thy Discov , hereby resign as a MGRM (Print Title)
of this limited liab resignation in wr	oility company and affirm the limited liability company has been notified of my ting.
Signature of Resi	gning Member, Managing Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)