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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: DAVID P. MI (Name of Limite)	DOFE SA. CONSTU
The enclosed member, managing member or n filing.	nanager resignation and fee(s) are submitted
Please return all correspondence concerning th	is matter to:
David Moore	
(Comact Terson)	
(Firm/Company)	
Le372 Paraheet	Trail
Persacola, FL 35 (City/State and Zip Code)	<u>2503</u>
For further information concerning this matter,	, please call:
David Heore (Name of Contact Person)	at (786) 350-8035 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for:  \$\square\$ \$\\$55 \text{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	mited liability company as it appears on the red VID P. Moore, Sr. Con	
2. This limited liabil	ty company was organized under the laws of:	
3. The Florida docum	nent/registration number of this limited liability	y company is:
4. I, CINDO (Print Nar	L. Hernandezhereby resign ne of Person Resigning)	as a Hanager (Print Tille)
resignation in writi	lity company and affirm the limited liability cong.  In the limited liability congression of the limited liability congression.  In the limited liability congression of the limited liability congression.	mpany has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	SECRETARY OF CORP