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COVER LETTER

TO: Registration Section Division of Corporations

DM CAPITAL 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:

ANDREY MALTSEV

(Contact Person)

DM CAPITAL LLC

(Firm/Company)

13834 EAGLES GLEN COURT

(Address)

ORLANDO FL 32837

(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREY MALTSEV

,407 \, 437-613⁷

(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	limited liability company as	it appears on the records	of the Florida Penartment
	CAPITAL LLC	it appears on the records	of the Florida Department
	ility company was organized	under the laws of:	16:29 Parminos
3. The Florida docu L130000918	ment/registration number of	this limited liability com	pany is:
4. I, FRANK ED	GERLY	, hereby resign as a	MANAGING MEMBER
(Print Name of Person Resigning)			(Print Title)
of this limited lial resignation in wri	oility company and affirm the ting.	e limited liability compar	y has been notified of my
X Signature of Resi	gning Member, Managing N	Iember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		