# L14000108092

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#### **COVER LETTER**

Division of Corporations Dice Industrial Services, LLC **SUBJECT:** (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: James L Dice (Contact Person) Dice Industrial Services, LLC (Firm/Company) 5520 Ira L Smith Rd (Address) Greenville, FL. 32331 (City/State and Zip Code) For further information concerning this matter, please call: Lamar Dice (Area Code & Daytime Telephone Number) (Name of Contact Person) 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

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)

#### **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it appears on the records of the Florida Department Industrial Services, LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L1400010809	2
3. The date this me 4. I, Melissa K. Di	mber/manager withdrew/resigned or will withdraw/resign is:
	ame of Person Resigning)
Manager	
	(Print Title)
of this limited lial resignation in wri	bility company and affirm the limited liability company has been notified of my iting.
Melissa	K. Nice
Signature of Di	ssociating Member or Resigning Manager
~	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)