# 114000115099

(Re	equestor's Name)	
. (Ac	ldress)	
(Ac	ldress)	<del></del>
(Ci	ty/State/Zip/Phone	<del>= #)</del>
PICK-UP	☐ WAIT	MAIL
(Bi	isiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



400263399414

09/26/14--01008--024 \*\*25.00

THE SEP 26 PH 3: 16

Red 10.614

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DOUBLE Clique Digital, LLC (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:
Double clique Digital, LLC
5780 SW 55 St (Address)
miami, FL 33155 (City/State and Zip Code)
For further information concerning this matter, please call:
ISOBELIO CISNEPOS at (305) 904-6017 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  23 \$25 Filing Fee

#### 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 (2/14)





### 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)

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: Double clique Digital, LLC
2. The Florida document/registration number assigned to this limited liability company is:
L14000115099
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/15/14
4. I, SteFane copoules, hereby withdraw/resign as a (Print Name of Person Resigning)
Manager (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
the last the
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)
Continue Copy. #50.00 (Optional)