L150000 65017

(Requestor's Name)	
(Address)	
	Address)	
	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions	to Filing Officer:	
:		

Office Use Only

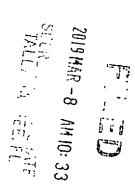


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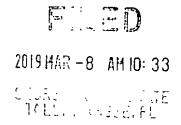


COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT:	DR Alton I, LLC					
	(Name of Limit	(Name of Limited Liability Company)				
The enclosed	l member, resignation or dissocia	tion and fee(s) are submitted for filing.			
Please return	all correspondence concerning t	his matter to:				
Donald K. (DeWoody, Jr.		_			
	(Contact Person)					
DR Alton I, LLC						
	(Firm/Company)		-			
131 Ellama	r Road					
	(Address)		-			
West Palm Beach, FL 33405						
	(City/State and Zip Code)		-			
For further information concerning this matter, please call:						
Don DeWo	ody	561	662-0290			
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for: \$\begin{align*} \text{S25 Filing Fee} \text{Certified Copy} \end{align*}						
Registration Division of C Clifton Build 2661 Execut	Corporations		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 th of State is: DR	e limited liability company as it appears on the records of the Florida Department Alton I, LLC
2. The Florida doo L150000650	cument/registration number assigned to this limited liability company is:
3. The date this m	ember/manager withdrew/resigned or will withdraw/resign is:
Drian I Dia	
Manager	
·	(Print Tule)
of this limited li resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Signature of D	Dissociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)