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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Corporations
SUBJECT: 3rd Dimension Investments, 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:
Thomas Lance III (Contact Person)
3rd Dimension Investments, LLC (Firm/Company)
14719 Ist Ave E (Address)
Bradenton FL 34212 (City/State and Zip Code)
For further information concerning this matter, please call:
Thomas Lance III at (941) 4147-3391 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sum \\$25 \text{ Filing Fee } \sqrt{2} \sqrt{2} \sqrt{55 \text{ Filing Fee & Certified Copy}}
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building RAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle Tallahassee, Florida 32301





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: 3	rd Dimension Investments, LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
L 1600	0046929
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: 7-21-16
4. I. Paul Pl	OVEN Chec hereby withdraw/resign as a
M51	Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
PalM	
Signature of D	ssociating Member or Resigning Manager
Filing Fee:	S25.00 (Required)
Codified Conv.	S30 (R) (Onional)