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PICK-UP WAIT MAIL		
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## COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3RD DIMENSION INVESTMENTS.	LLC
<del></del>	ed Liability Company)
The enclosed member, resignation or dissocia	tion and fee(s) are submitted for filing.
Please return all correspondence concerning t	his matter to:
LANCE, THOMAS B, III	
(Contact Person)	
3RD DIMENSION INVESTMENTS, LLC	
(Firm/Company)	
14719 IST AVE. EAST	Z
(Address)	
BRADENTON, FL 34212	
(City/State and Zip Code)	
For further information concerning this matter	r, please call:
LANCE, THOMAS B, HI	at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to  \$\Boxed{\Boxes} \$25 Filing Fee	the Florida Department of State for:  ☐ \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 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)

3RD DIMENSION INVESTMENTS, LI	it appears on the records of the Florida Department
of State is:  2. The Florida document/registration number as: L16000046929	signed to this limited liability company is:
3. The date this member/manager withdrew/resi  4. I.	gned or will withdraw/resign is:
(Print Name of Person Resigning) Manager	, hereby withdraw/resign as a
Signature of Dissociating Member or Resign	(aka Shannon O'Donnell  Lance)
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	