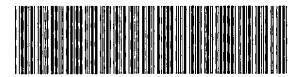
(Reque	estor's Name)			
(Addre	ss)			
(Addre	ss)			
(City/S	tate/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Busine	ess Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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## **COVER LETTER**

TO:	_	Registration Section			
	Divis	ion of Corporations			
SUBJE	ECT:	D & N Industries, LLC			
		(Name of	Limited Liability Co	ompany)	
The en	closed	I member, resignation or dis	sociation and fee(	(s) are submitted for filing.	
Please	return	all correspondence concerr	ning this matter to	:	
Kevin A	Nicho	ls	,		
		(Contact Person)	·	_	
		(Firm/Company)		_	
3655 Ro	sewoo	d Drive			
		(Address)		<u> </u>	
Marion,	IN 469	952			
		(City/State and Zip Code)		_	
For fur	ther ir	nformation concerning this i	natter, please call	:	
Kevin N	lichols		765	661-6216 )	
	(N	ame of Contact Person)	(Area Code	e & Daytime Telephone Number)	
Enclose	ed ple	ase find a check made payal	ble to the Florida	Department of State for:	
<b>\$25</b>	Filing	Fee	□ \$55 Filin	ig Fee & Certified Copy	
		ng Address:		Street Address:	
	_	stration Section ion of Corporations		Registration Section Division of Corporations	
		Box 6327		The Centre of Tallahassee	
		hassee, FL 32314		2415 N. Monroe Street, Suite 810	
	1 4114	(1455CC, 1 L J2J17		Tallahassee, FL 32303	

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)

D.& N	limited liability company as it Undustries, LLC	appears on the records of the Florida	i Departmer	n <b>t</b>
2. The Florida docu L16000207559	iment/registration number assi	gned to this limited liability company	y is:	
3. The date this me	mber/manager withdrew/resign	ned or will withdraw/resign is:	019	
4. 1, Kevin A Nichols, hereby withdraw/resign as a, hereby withdraw/resign as a				
Manager				
-	(Print Title)			
resignation in wr	• •	limited liability company has been no	2019 DEC	y #1
	\$25.00 (Required) \$30.00 (Optional)		19 AM 10: 2:	: 