117000009373

(Requestor's Name)					
(Address)					
(Address)	—				
(City/State/Zip/Phone #)					
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PICK-UP WAIT MAIL					
(Business Entity Name)	—				
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COVER LETTER

TO:	Registration Section		(9)
	Division of Corporations		Ç
SUBJE	Red Diggity Dog. LLC		
	(Name of Limit	ed Liability Co	mpany)
The end	closed member, resignation or dissocia	tion and fee(s) are submitted for filing.
Please	return all correspondence concerning th	nis matter to:	
Kari A.	Metzger, Esq.		
	(Contact Person)		
Metzger	Law Group, P.A.		
	(Firm/Company)		
3018 W	. Horatio Street		
	(Address)		_
Tampa,	FL 33609		
	(City/State and Zip Code)		_
For fur	ther information concerning this matter	, please call:	
Kari A.	Metzger	813 at (288-2650
	(Name of Contact Person)		& Daytime Telephone Number)
Enclose	ed please find a check made payable to	the Florida I	Department of State for:
\$25	Filing Fee	□ \$55 Filin	g Fee & Certified Copy
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
			Tallahassee, FL 32303

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM ELORIDA OR EODELON LIMITED LIABILITY COMPANY FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it a	appears on the records of the Florida Department
2. The Florida docu L17000009373	ument/registration number assig	ned to this limited liability company is:
3. The date this me	mber/manager withdrew/resign	ed or will withdraw/resign is:
Ct. L. Davis	lame of Person Resigning)	
Manager	, ,	
	(Print Title)	
of this limited lia resignation in wr		mited liability company has been notified of my
Signature of Di	issociating Member or Resignin	g Manager
	\$25.00 (Required) \$30.00 (Optional)	