L17000156273

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Dyon's Dynostry (Name of Limited Liability Com	npany)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:	
(Contact Person)	-
(Firm/Company)	-
1214 Avordale Laire	2018 1 TALL
West Palm Beach, F1 33409 (City/State and Zip Code)	NOV 26
(City/State and Zip Code) For further information concerning this matter, please call:	FILE WY 9: 1
(Name of Contact Person) at (561) (Area Code	
Enclosed please find a check made payable to the Florida D S25 Filing Fee \$55 Filing	Department of State for: Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (2/14)

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
	Dyon's Dynasty
2. The Florida doc	ment/registration number assigned to this limited liability company is:
L170001	56273
3. The date this mo	mber/manager withdrew/resigned or will withdraw/resign is: 10/31/18
4. 1. A Diced (Print N	e (Texturer hereby withdraw/resign as a June of Person Resigning)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified 🏖 my
Aluade 1	Naway issociating Member or Resigning Manager
Signature of D	ssociating Member or Resigning Manager
	\$25.00 (Required) \$30.00 (Optional)