

L17000229561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

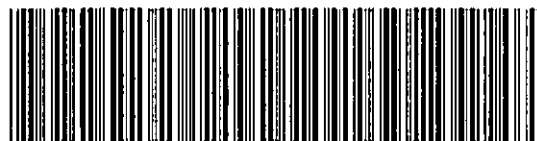
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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JAN 17 2020

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2019 DEC 16 PM 2:00

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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: Destremi LLC

2. The Florida document/registration number assigned to this limited liability company is:

417000229561

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/31/2019

4. I, Dawn Gagnon, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Tres  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Dawn R. Gagnon  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

2019 DEC 16 PM 2:00