

4800000 3369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

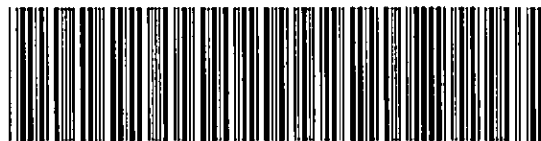
(Business Entity Name)

(Document Number)

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CLERK OF THE STATE
TALLAHASSEE FL 32304

D. BRUCE
FEB 15 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D & M Special Items LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

David Curran

(Contact Person)

D & M Special Items LLC

(Firm/Company)

5727 Sanibel Captiva Rd Unit 2

(Address)

Sanibel FL 33957

(City/State and Zip Code)

For further information concerning this matter, please call:

David Curran

at 917 596-1999

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
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CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA



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: D & M Special Items LLC

2. The Florida document/registration number assigned to this limited liability company is:
L18000003369

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Feb 7 2019

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

Authorized Member

(Print Title)

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

Signature of Dissociating Member or Resigning Manager

FILED
2019 FEB -8 PM 1:29
DIVISION OF CORPORATIONS
FLORIDA

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