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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT: Dest	In One Carpentry, LLC Limited Liability Company)
The en	nclosed member, resignation or dis	sociation and fee(s) are submitted for filing.
Please	e return all correspondence concern	ing this matter to:
	Adam Kirkscy (Contact Person)	
	Design One Carpent	ry, lic
	9058 39th St. Cir. (Address)	ile E
	Parrish F1 34 (City/State and Zip Code)	219
For fu	arther information concerning this	
	Adam KirkScy (Name of Contact Person)	at (813) 241 - 5561 (Area Code & Daytime Telephone Number)
	sed please find a check made paya 5 Filing Fee	ble to the Florida Department of State for: \$\infty\$\$ \$55 Filing Fee & Certified Copy
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



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 con	npany as i	t appears on the rec	ords of the Florida Depa	rtment
of State is:	Design	One	Carpentry	LLC	·
2. The Florida docu	ment/registration n	umber ass	igned to this limited	l liability company is:	
	000130205	.	·		
3. The date this men	mber/manager with	irew/resig	gned or will withdra	w/resign is: 12 23 ;	2021
4. 1, Ryan (Print No.					
Authonza	ed Member Print Title)	·			
of this limited liab resignation in wri	· · · · · · · · · · · · · · · · · · ·	affirm the	limited liability cor	npany has been notified	of my
	ve de	2			282 2
Signature of Di	ssociating Member	or Resign	ing Manager	1	-
Filing Fee: Certified Copy:					