L19000109196

(De vuente de Name)			
(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:			
<u></u>			

Office Use Only



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COVER LETTER

TO:	Registration Section		
	Division of Corporations		
SUBJ	Deepstone Properties LLC		
	(Name of I	Limited Liability C	ompany)
The e	nclosed member, resignation or diss	ociation and fee	e(s) are submitted for filing.
Please	e return all correspondence concerni	ng this matter to	D:
John C	Cornetta		
	(Contact Person)		<u> </u>
Deepst	tone Properties LLC		
	(Firm/Company)		
5531 a	rnie loop		
	(Address)	,	<u> </u>
Braden	iton FI 34211		
	(City/State and Zip Code)		_
For fu	rther information concerning this ma	atter, please call	l:
Hunter	McCrory	813 at (695-3898
	(Name of Contact Person)		le & Daytime Telephone Number)
Enclos	sed please find a check made payable	e to the Florida	Department of State for:
	Filing Fee		ng 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







DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

Deep	limited liability company as it appears on the records of the Florida Department stone Properties LLC
2. The Florida doc 83-4586950	ument/registration number assigned to this limited liability company is:
2 77 1	5/20/2020
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
Hunter McCrory	hamahar with drawlessian as a
4. 1,	, hereby withdraw/resign as a a draw of Person Resigning)
Title Manager	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of 1)	ssociating Member of Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)