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C. BRUMBLEY
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COVER LETTER

_	stration Section ion of Corporations	•	
SUBJECT:	NICHOLS & DYMES LLC		
	(Name of	Limited Liability Co	ompany)
The enclosed	I member, resignation or dis		
Please return	all correspondence concern	ing this matter to	:
CYNTHIA NIC	THOLS		
	(Contact Person)	-	_
NICHOLS & E	DYMES LLC		
 ,, ,,,	(Firm/Company)		_ -
2410 9TH AVI	EN		
	(Address)	· · · · · · · · · · · · · · · · · · ·	
ST PETERSBU	JRG, FL 33713		
	(City/State and Zip Code)		
For further in	nformation concerning this n	natter, please call	:
CYNTHIA NIC	CHOLS	813 at (597-5494)
(N	ame of Contact Person)	(Area Cod	e & Daytime Telephone Number)
Enclosed ple	ase find a check made payat	ole to the Florida	Department of State for:
■ \$25 Filing			ng Fee & Certified Copy
<u>Mailir</u>	ng Address:		Street Address:
	stration Section		Registration Section
	ion of Corporations Box 6327		Division of Corporations The Centre of Tallahassee
	hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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)

eg Ni	limited liability company as	s it appears on the records of the	ne Florida Departme	nt
2. The Florida doc:	ument/registration number as	ssigned to this limited liability	company is:	
IOM M DEATH	11211	signed or will withdraw/resign, hereby withdraw/resign		-
MEMBER	(Print Title)			
of this limited lia resignation in wr	bility company and affirm the iting. Beaulieu issociating Member or Resig	ne limited liability company ha	as been notified and 10 AM 8:	y 7
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		3:56	B.