L19000277539

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COVER LETTER

Division of Corporations Name of Limited Liability Company DOCUMENT NUMBER: L19000277539 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Person ERIC J. GRABOIS, P.L. Name of Firm/Company 1666 79TH STREET, STE. 500 Address NORTH BAY VILLAGE, FL 33141 City/State and Zip Code SERVICE@GRABOISLAW.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ERIC J. GRABOIS Name of Person

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

Registration Section

TO:

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 605.0115, Florida Statutes, the und	dersigned,	
ERIC J. GRABOIS, P	.L.	, hereby resigns as	
	Name of Registered Agent	_,	
Registered Agent for	DM & BM HOLDINGS, LLC		
	Name of Limited Liability Company		,
1.19000277539			
Documen	Number, if known		
A copy of this resign	ation was mailed to the above listed limited liabilit	y company at its last known address.	
The agency is termin	ated and the office discontinued on the 31st day af	ter the date on which this statement is	filed.
	Je-		
	Signature of Resigning Agen	1023	ATT RE
If signing on behalf of	of an entity:	2023 MAY 22	47 34 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	ERIC J. GRABOIS	22	R
	Typed or Printed Name	 P	2,2,C
	MANAGER	<u></u>	
	Capacity	20	ATION N

\$85.00 Active limited liability company
\$25.00 Administratively dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314