L21000398750

(Requestor's Name)
(Address)
(Address)
(0001655)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Coosine Manager)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





100373177491

09/16/21--01009--019 **25.00







COVER LETTER

TO: Regis	stration Section		
Divis	sion of Corporations		
SUBJECT:	DnZ Property Solutions LLC		
	(Name of L	imited Liability Co	mpany)
The enclosed	l member, resignation or disso	ociation and fee(s) are submitted for filing.
Please return	all correspondence concernir	ng this matter to:	:
Daniel Vargas			
	(Contact Person)		-
DnZ Property S	Solutions LLC		
*	(Firm/Company)		_
4293 Danbury	Terrace		
	(Address)		_
North Port, FL	34286		
	(City/State and Zip Code)		_
For further in	nformation concerning this ma	atter, please call:	:
Daniel Vargas		239 at (898-6370
(N	ame of Contact Person)		e & Daytime Telephone Number)
Enclosed ple	ase find a check made payabl	e to the Florida	Department of State for:
■ \$25 Filing	g Fee	□ \$55 Filin	g Fee & Certified Copy
Regis	ng Address: stration Section sion of Corporations		Street Address: Registration Section Division of Corporations
P.O.	Box 6327 hassee, FL 32314		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)

	limited liability company as Property Solutions LLC	s it appears on the records	of the Florida Department
2. The Florida docu L21000398750	ument/registration number a	ssigned to this limited liab	oility company is:
3. The date this me	mber/manager withdrew/res	signed or will withdraw/re	99/14/21 sign is:
Zinnia Vargas 4. I,		, hereby withdraw/re	esign as a
	ame of Person Resigning)		
COO			
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm thiting.	he limited liability compar	ny has been notified of my
Zuin	Chagen		
Signature of Di	ssociating/Member or Resig	gning Manager	2021 SE
Filing Fee:	\$25.00 (Required)		
Certified Copy:			6 MM 9:44