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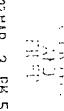
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## COVER LETTER

**Division of Corporations** PALMER PROPERTY MAINTENANCE OF PUNTA GORDA LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: **GARY PALMER** (Contact Person) (Firm/Company) PALMER PROPERTY MAINTENANCE OF PUNTA GORDA LLC -> (Address) 1780 DEBORAH DR, 7, PUNTA GORDA 33950 (City/State and Zip Code) For further information concerning this matter, please call: GARY PALMER 860 4623644 (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: **\$25** Filing Fee ☐ \$55 Filing Fee & Certified Copy Street Address: Mailing 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

TO:

Registration Section



## 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)

DAT	Elimited liability company as it appears on the records of the Florida Department MER PROPERTY MAINTENANCE OF PUNTA GORDA LLC
2. The Florida doc L21000460944	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
CADV DALME	
MEMBER	
-	(Print Title)
of this limited lia resignation in wi	ibility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
Signature of	issociating incliner of itestgling manager
~	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)