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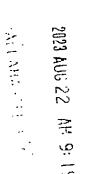
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COVER LETTER

TO: Registration Section **Division of Corporations** CARPENTER DIRECT, 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: DOUGLAS SESSIONS (Contact Person) CARPENTER DIRECT (Firm/Company) 370 WEST 6TH STREET (Address) SAN BERNARDINO, CA 92401 (City/State and Zip Code) For further information concerning this matter, please call: JACQUELINE MYRICK 954 at ((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 **Mailing Address:** Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations**

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 32314



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ACLAHAMA (ACC)

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)

1. The name of the l	imited liability company	as it appears on the records of the Florida Department
of State is: CARP	ENTER DIRECT, LLC	·
2. The Florida docum	ment/registration number	assigned to this limited liability company is:
L23000374196		
3. The date this men	nber/manager withdrew/r	esigned or will withdraw/resign is:
JACQUEI\LINE MYRICK		hereby withdraw/resign as a
(Print Na	me of Person Resigning)	, hereby withdraw/resign as a
CFO		
	Print Title)	
of this limited liab		the limited liability company has been notified of my
- Jargh	1 Holsen	<u></u>
Signature of Dis	sociating Monitor or Res	igning Manager
	\bigcup	
-	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	