

M05000005963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

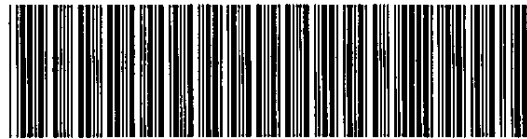
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500292865285

12/16/16--01012--015 **60.00

FILED
16 DEC 16 PM 4:36
DIVISION OF COURT CLERK

O SIMMONS
DEC 19 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DEM MANAGEMENT LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICIA MAKIELSKI
(Name of Person)

DEM MANAGEMENT LLC
(Firm/Company)

5552 N Harbor Village Dr
(Address)

VERO BEACH FL 32967
(City/State and Zip Code)

For further information concerning this matter, please call:

Patti MAKIELSKI at (301) 399 6658
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☒ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

DPM MANAGEMENT LLC

(Name of limited liability company)

MARYLAND

(Jurisdiction of its organization)

10-21-05

(Date registered with Florida Department of State)

MO 5000005963

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Bob D. Man

(Signature of authorized representative)

PATRICIA S. MAKIELSKI

(Typed or printed name of signee)

DIVISION OF CERTIFICATES

16 DEC 16 PM 4:36

FILED

Filing Fee: \$25.00