## P0500015958

(Re	equestor's Name)	
(Ac	dress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	∍ #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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Office Use Only

(D) (KES)



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SECRETARY OF STATEOUS OF JUL 16 PM 3: 39

## **COVER LETTER**

Division of Corporations
SUBJECT: DAB & Company, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P05000159558
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Dominic A. Bioni
(Name of Person)
(Name of Firm/Company)
28435 Sabal Palm Drive
(Address)
Punta Gorda, Fl. 33982-1104
(City/State and Zip Code)
For further information concerning this matter, please call:
Dominic A. Bioni at (941) 575-9386  (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO: Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I,</sub> Dominic A. Bioni	, hereby resign as P
	(Title)
of DAB & Company, Inc.	·
(Name	of Corporation)
P05000159558 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	Signature of resigning officer/director)  7 July 6 PM 3:

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

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