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SECRETARY OF STATE TALLAHASSEE FLORIDA

(JUN = 2 2015 T CANNON

COVER LETTER

TO:

CR2E079 (2/14)

TO:	_	stration Section sion of Corporations		
SUBJI	ECT:	RENT SMART FT. LAUDER	DALE LLC	
		(Name of Lim	ited Liability Cor	npany)
The en	closed	l member, resignation or dissoci	ation and fee(s	s) are submitted for filing.
Please	return	all correspondence concerning	this matter to:	
GABF	RIEL (GUIJARRO		
		(Contact Person)		_
RENT	SMA	RT FT. LAUDERDALE LLC		
		(Firm/Company)		_
339 S	E 247	TH STREET		
		(Address)		_
FT LA	UDE	RDALE, FL 33316		
		(City/State and Zip Code)		
For fur	ther in	nformation concerning this matte	er, please call:	
GABF	RIEL	SUIJARRO	954 at (640-7368
	(N	ame of Contact Person)		& Daytime Telephone Number)
Enclos	-	ase find a check made payable to Fee		Department of State for: g Fee & Certified Copy
Registi Divisio Clifton 2661 E	ration on of Constitution of C	OURIER ADDRESS: Section Corporations ling live Center Circle Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 MAY 26 PM 12: 54

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	limited liability company as it appears on the records of the Florida Department
of State is: REA	IT SMART FT. LAUDERDALE LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L1200004492	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 5/15/2015
4. I,ASYA SCOT	, hereby withdraw/resign as a a man of Person Resigning)
MGRM	
	(Print Title)
of this limited lial resignation in wri	bility company and affirm the limited liability company has been notified of my ting.
Signature of Di	ssociating Member or Resigning Manager
-	\$25.00 (Required) \$30.00 (Optional)