# L21000251230

(Re	equestor's Name)	-
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
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#### **COVER LETTER**

TO: Registration Section Division of Corporations	
666 Investments LLC SUBJECT:	
	ed Liability Company)
The enclosed member, resignation or dissociat	tion and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to:
Marcus Thompson, Esq.	
(Contact Person)	
Old City Law, PLLC	
(Firm/Company)	
1 Riberia Street	
(Address)	
St. Augustine, FL 32084	
(City/State and Zip Code)	
For further information concerning this matter	, please call:
Marcus Thompson, Esq.	904 478-8081 at ( )
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	•
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



### FILED

#### 2021 JUL 28 PH 12: 37

SECRETARY OF STATE TALLAHASSEE, FLCF: .

#### 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	e limited liability company as	it appears on the records of the Florida Department
of State is: 666 I	Investments LLC	·
2. The Florida doc L21000251230	rument/registration number as:	signed to this limited liability company is:
3. The date this me	ember/manager withdrew/resi	gned or will withdraw/resign is: 7/23/2021
4. I, Richard L. Bornmann (Print Name of Person Resigning)		, hereby withdraw/resign as a
Member and Mar	nager	
	(Print Title)	
of this limited lia resignation in wr		e limited liability company has been notified of my
Ruhard	L Bonn	~~
	issociating Member or Resign	
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	