## 10300000588

(Re	questor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
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TALLAHASSEE, FLORID



## 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 Flo	orida Department
of State is: R	TG INVEST	MENTS	s UC	
2. The Florida doc	ument/registration numbe	r assigned to this	s limited liability com	pany is:
L0300	3000588			
3. The date this me	mber/manager withdrew/	resigned or will	withdraw/resign is:	11-20-14
	L ROSABO  Jame of Person Resigning)	, hereby	withdraw/resign as a	
MANAE	(Print Title)	_•		
of this limited lia resignation in wr	bility company and affirn	n the limited liab	ility company has bee	en notified of my
Lafry	Roder			
Signature of Di	ssociating Member or Re	signing Manage	r	
				TAL CO
<del>-</del>	\$25.00 (Required)			EUR LA
Certified Copy:	\$30.00 (Optional)			<u> </u>