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O SIMMONE MAY 1 2 2017

COVER LETTER

_	itration Section ion of Corporations					
SUBJECT:	RITCON INVESTMENTS, LLC					
	(Name of Limited Liability Company)					
The enclosed	I member, resignation or dissocia	tion and fee(s) are submitted for filing.			
Please return	all correspondence concerning the	his matter to:				
Frank Coni			_			
	(Contact Person)					
E.R. Bradle	y's, Inc.					
	(Firm/Company)		•			
104 Clemat	is Street		_			
	(Address)					
West Palm	Beach, FL 33401					
	(City/State and Zip Code)		=			
For further information concerning this matter, please call:						
Frank Coni	glio	561	833-3520			
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)			
Enclosed ple \$25 Filing	ase find a check made payable to Fee		repartment of State for: Fee & Certified Copy			
Registration Division of C Clifton Build 2661 Execut	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

CR2E079 (2/14)



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)

	mited liability company as ON INVESTMENTS, LLC		ords of the Florida Department
2. The Florida docum	nent/registration number as	signed to this limited	l liability company is:
3. The date this men	nber/manager withdrew/resi	gned or will withdra	w/resign is: 01/01/18
4. I, Sid Ritman	me of Person Resigning)	, hereby withdra	aw/resign as a
Manager (4)	Print Title)		•
of this limited liab resignation in writ	• •	e limited liability cor	mpany has been notified of my
Die	Ryman		
Signature of Dis	sociating Member or Resig	ning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

CR2E079 (2/14)