

204000060747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

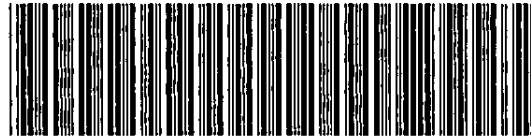
Special Instructions to Filing Officer:

A. LUNT

DEC - 7 2012

EXAMINER

Office Use Only



600242296396

12/05/12--01015--033 **55.00

2012 DEC - 5 PM 1:41
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RSC-GSC MANAGEMENT, LLC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Avi Bittan

(Contact Person)

Royal Senior Care

(Firm/Company)

1660 NE Miami Gardens Dr. Ste 8

(Address)

North Miami Beach FL 33179

(City/State and Zip Code)

For further information concerning this matter, please call:

Avi Bittan

(Name of Contact Person)

at (305) 310-4477

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

FILED
2012 DEC -5 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: RSC-GSC MANAGEMENT, LLC

2. This limited liability company was organized under the laws of:
Florida 08/16/2004

3. The Florida document/registration number of this limited liability company is:
L04000060747

4. I, Avi Bittan, hereby resign as a MGR
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JUN 12 2004 5 PM 14 42

FILED