L04000084073

(Re	questor's Name)		
(Ad	dress)		
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(Cit	y/State/Zip/Phone	e #)	
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SECTION OF STATE

J. SAULSBERRY EXAMINER

DEC 7 2012

COVER LETTER

Division of Corporations		
SUBJECT: RSC HOLLYWOOD, LL (Name of Limite	C ed Liability Company)	
The enclosed member, managing member or r filing.	nanager resignation and fee(s) are submitted for	
Please return all correspondence concerning the	nis matter to:	
Avi Bittan	•••	
(Contact Person)	A Se 2	
	70 A+	
Royal Senior Care	73. Agranda	
(Firm/Company)	TARY OF ASSEE.	
1660 NE Miami Gardens Dr. Ste 8	S CO	
(Address)	CRETARY OF STATE LAHASSEE, FLORIO,	
)A	
North Miami Beach FL 33179		
(City/State and Zip Code)	·	
(6.5)/5 2		
For further information concerning this matter	r, please call:	
Avi Bittan	_{at (} 305 ₎ 310-4477	
(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	
STREET/COURIER ADDRESS:	MAILING ADDDESS.	
Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	,	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as it a	appears on the records of the	e Florida Depa	artment
	ility company was organized ur FLORIDA	nder the laws of:	"SEGRETAR TALLAHASS	28 FZ 0EC -
L04000084	ument/registration number of th	is limited liability company 	Y OF STATE SEE, FLORIDA	5 Am 9: 00
4. I, Avi Bittan		_, hereby resign as a MG	<u>R </u>	
(Print Name of Person Resigning)			(Print Title)	
resignation in wr	pility company and affirm the liting. But the liting of t		: been notified	l of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			