L050000 29916

| (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: | | | |
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Office Use Only



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COVER LETTER -

| TO: Registration Section Division of Corporations | |
|---------------------------------------------------------------------------|---------------------------------------------------------------|
| SUBJECT: RFM, LLC (Name of Limited Liab | ility Company) |
| | |
| The enclosed member, resignation or dissociation an | d fee(s) are submitted for filing. |
| Please return all correspondence concerning this mat | iter to: |
| Scott C. Whitaker (Contact Person) | |
| (Contact Person) | |
| (Firm/Company) | |
| (FirmeCompany) | |
| 13041 McGregor Blvd. | |
| Fort Myers: FL 33919 (City/State and Zip Code) | |
| For further information concerning this matter, pleas | e call: |
| Scott C. Whitaker at (at () | 239) 481-1331 a Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the Flo ■ \$25 Filing Fee | orida Department of State for: Filing Fee & Certified Copy |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| Clifton Building 2661 Executive Center Circle | P.O. Box 6327 |
| Tallahassee, Florida 32301 | 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)

| L. The name of the | limited liability company as | s it appears on the records of the Florida Departmen |
|--------------------------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------|
| of State is: | RFM, LLC | |
| 2. The Florida docu | iment/registration number a | ssigned to this limited liability company is: |
| L 0500 | 000 29916 | <u>,</u> |
| 3. The date this me | mber/manager withdrew/res | signed or will withdraw/resign is: <u>/0/18/2019</u> |
| | | h |
| Managing | Member . | nereby withdrawresign as #6 NEXT NO. 12 SEE TO 12 The limited liability company has been notified of my |
| of this limited liat resignation in wri | oility company and affirm thiting. | ne limited liability company That been notified of my |
| L~12 | <u></u> | |
| Signature of Di | ssociating Member or Resig | ning Manager |
| - | \$25.00 (Required) \$30.00 (Optional) | |