

W05000075474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

W05-75474

(Document Number)

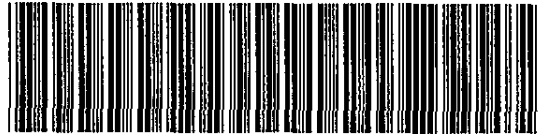
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06 APR 21 AM 10:43
TALLAHASSEE FLORIDA

M. HODGES

COVER LETTER

TO: Registration Section
Division of Corporations

LOS000075474

SUBJECT: ROSS FAIRCHILD AND ASSOCIATES LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRIAN FELDMAN
(Name of Person)

ROSS FAIRCHILD AND ASSOCIATES
(Firm/Company)

6194 N FEDERAL HWY
(Address)

BOCA RATON, FL 33487
(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN FELDMAN at (561) 541-0085
(Name of Person) (Area Code & Daytime Telephone Number)

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, BRIAN FELDMAN, hereby resign as MANAGING PARTNER
(Title)
of ROSS FAIRCHILD AND ASSOCIATES LLC,
(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA,

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

Brian Feldman
(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE FLORIDA