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(Re	equestor's Name)	
· (Ac	idress)	
•		
(Ac	ldress)	
· (Ci	ty/State/Zip/Phone	#)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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06 JUN 19 PM 2: 29 SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Robeau Properties 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:
Mike Thibeau (Name of Person) Robeau Properties (Firm/Company) 108-C Plantaton Drive (Address)
Titusville FL 32780 (City/State and Zip Code)
For further information concerning this matter, please call:
Doug Baker at (321) 267-2190 (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Clifton Building P.O. Box 6327 Cleft 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 \$\times \text{Certified Copy}\$

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

, Scott Roix	hereby resign as Managing Member (Fitte)	
of Robeau Properties, LL (Limited Liabil	C lity Cornpany)	
a limited liability company organized under the la	ws of the State of FLORIDA,	
and affirm that the limited liability company has b	een notified in writing of the resignation.	
	O6 JUN TALLE	<u>1</u> .
(Signature of resigning manager,	767 T	5
	PH 2: 29 PH 2: 29 FLORIDE	

FILING FEE IS \$25.00

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