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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	ja ja
Design	• • • • • • • • • • • • • • • • • • • •	
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SECRETARY DE STATE
AND AHASSEE, FLORIDI

COVER LETTER

TO: Registration Section Division of Corporations	s ,
SUBJECT: 2+ R Development Sewies, LLC (Name of Limited Liability Company)	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
But Zopa (Name of Person)	
Weichert Realtors On the Cicle (Firm/Company)	
301 John Ringling Blud	
Saraseta FL 34236 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (94() 388-5575 (Area Code & Daytime Telephone Number)	_
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certificate of Status (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)	ž.

MAILING ADDRESS:

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, <u>But Zupa</u> , hereby resign as <u>Man</u>	2 gen	_
of 2 + R Development Services, LL (Limited Liability Company)	C	,
a limited liability company organized under the laws of the State of FLori	DA	,
ASSET	of SEP 12 PM 1:30	

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