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(Address)					
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M. HODGES

## Fax To: 352-383-5554

#### **COVER LETTER**

<b>55</b> ,	DAT ME I TER	
TO: Registration Section Division of Corporations		
SUBJECT: RJMS INVESTM	MENTS LLC	
(rente or on	once Engenty Company)	
Dear Sir or Madam:		
THE COLUMN STREET STREET		
ine enclosed Resignation of Member, Managin	g Member or Manager and fee(s) are submitted for filin	
Please return all correspondence concerning this	s matter to the following:	
SHIRISH PATEL		
(Name of Person)		
RIMS INVESTMENTS	uc	
(Firm/Company)		
PO BOX 1150.		
(Address)		
Transact Ta	20448	
ZELLWOOD, FL (City/State and Zip Code)	32/98	
(City/State and Zip Code)		
For further information concerning this matter,	please call:	
SHIRISH PATEL	at ( 407 ) 452- 9168 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount	:	
\$25 Filing Fee	\$55 Filing Fee &	
I THE PART I HAVE I GO	Certified Copy	
CR2E079 (8/05)	ANTONE ACKS	



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

#### RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

Į,	JAIMIN	PATEL	, hereby resign as	MGRM	
				(Title)	
of_	RIMS	INVESTMENTE	LLC		
		(Limited Liel	oility Company)		
a lir	nited liability cor	npany organized under the	laws of the State ofF	LORIDA	
and	affirm that the lip	mited liability company has	been notified in writing	of the resignation.	
		nature of resigning manage	2012		
	A-100-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Hemin	· K. 14-0		
	(Sig	nature of resigning manage	r, 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
Tallabassee, FL 32314

CR2E079 (8/05)