

L060000080204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

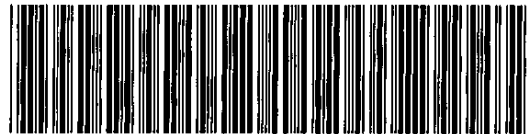
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RTS OF SIESTA KEY, LLC DBA REAL TIME STINKS  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

SHAWN HORNE  
(Contact Person)

RTS OF SIESTA KEY, LLC  
(Firm/Company)

7255 CASS CIRCLE  
(Address)

SARASOTA, FL 34231  
(City/State and Zip Code)

For further information concerning this matter, please call:

SHAWN HORNE at ( 941 ) 927-5440  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &

Certified Copy



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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DIVISION OF CORPORATIONS  
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**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: RIS OF SIESTA KEY, LLC DBA RED TIDE STINKS

2. This limited liability company was organized under the laws of:

FLORIDA

3. The Florida document/registration number of this limited liability company is:

L06000080204

4. I, TINA ALCARESE, hereby resign as a MEMBER/Managing Mbr.  
(Print Name of Person Resigning) (Print Title)

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

Tina Alcarese

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)