

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: GILLIGAN, GOODÎNG & FRANJOLA

Account Number : 120010000016 Phone

: (352)867~7707

Fax Number

: (352)867-0237

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please at

Email Address: HELESTEL E MELLS CEPERS LEWIL

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RITI INVESTMENTS, L.L.C.

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DIRECTOR'S OFFICE

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GILLIGAN KING GOODIN

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Riti Investments, L.L.C.	,
(Name of L	limited Liability Company)
The enclosed member, resignation or disse	ociation and fec(s) are submitted for filling.
Please return all correspondence concerning	ng this matter to:
W. James Gooding III	
(Connet Passon)	·
Gilligan, Gooding & Franjola, P.A.	
(Picu/Compuny)	
1531 SE 36th Avenue	
(Addresa)	
Ocala, Florida 34471	
(City/State and Zip Code)	
For further information concerning this ma	niter, please call:
Karla Hayter	at (352) 867-7707
(Name of Confact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	e to the Florida Department of State for: \$\sigma\$ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations
2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314

Tallahassec, Florida 32301

CR2E079 (2/14)

04/15/2015 18:14

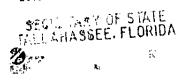
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GILLIGAN KING GOODIN

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Plorida Statutes)

2. The Florida doc L0700009717	nument/registration number assigned to this limited Hability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: 12/31/2014
4. I, Jayesh A. P	heroby withdraw/resign as a Name of Person Resigning)
	Managing Member
	(Print Title)
resignation in w	bility company and affirm the limited jiability company has been notified of my iting. Security Security
•	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)

CR2B079 (2/1-1)