· (Re	questor's Name)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
. PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	ame)
(Do	cument Number	r)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	·
	ل	A. LUNT IAN 24 2011 AMINED

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: RonDon, LLC (Name of Limited Line)	ability Company)		
The enclosed member, managing member or mana	ger resignation and fee(s) are submitted for		
filing.	Ber 10018		
Please return all correspondence concerning this m	natter to:		
Monique Peterson			
(Contact Person)	2012 F41.		
RonDon, LLC	2012 JAN 20 SLEEL HARSE	P-344	
(Firm/Company)	20		
114 SE 2nd Ave	AN IQ	П	
(Address)		***	
Boca Raton, Fl. 33432	,,		
(City/State and Zip Code)			
For further information concerning this matter, ple	ease call:		
Monique Peterson	561 865 030 N		
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$\int_\$55 \text{ Filing Fee & Certified Copy}\$		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee Florida 32301	i alialiassee, l'iuliua 32314		

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is: Roi	limited liability company as it	appears on the records	of the Florida	Departi	ment	
2. This limited liability company was organized und Florida		inder the laws of:	ALLAH/ASE	2012 JAN 20	METALOMPHIA METALOMPHIA PERSONNELL	
3. The Florida doci L08000045	ument/registration number of t	his limited liability con	npany is:	AM ION 28		
4. I, Ronald Belluscio (Print Name of Person Resigning)		, hereby resign as a	_, hereby resign as a Manager/Member (Print Title)			
of this limited lial resignation in wr	bility company and affirm the		,	,	f my	
	gning Member, Managing Me					
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					