

L09600677655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

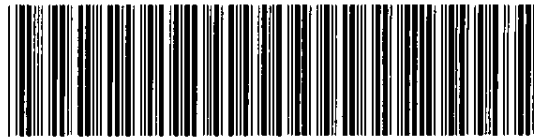
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



700193582107

03/25/11--01005--003 **55.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR 24 AM 9:38

T. HAMPTON

MAR 26 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Robie Learning Center, LLC
(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:

Daniel Robie

(Contact Person)

Robie Learning Center, LLC

(Firm/Company)

3663 Derbyshire Road #105

(Address)

Casselberry, FL 32707

(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel Robie

(Name of Contact Person)

at (407) 435-9313

(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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 14, 2011

DANIEL ROBIE
3663 DERBYSHIRE RD
105
CASSELBERRY, FL 32707

SUBJECT: ROBIE LEARNING CENTER, LLC
Ref. Number: L09000077655

We have received your document for ROBIE LEARNING CENTER, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$55.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 411A00006167



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 limited liability company as it appears on the records of the Florida Department of State is: Robie Learning Center, LLC
2. This limited liability company was organized under the laws of:
The State of Florida
3. The Florida document/registration number of this limited liability company is:
L09000077655

4. I, Ryan M. Beasley, hereby resign as a Managing Member
(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.


Signature of Resigning Member, Managing Member or Manager

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR 24 AM 9:30