## L110000024567

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	(Only/Otato/Zip// Hone #)
PICK-UI	P   WAIT   MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer
Opeolal Instructions	
	A. LUNT
	JUL 11 2011
	EXAMINER
	- VOIVIIINER

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: RICHY RICH LLC	
(Name of Limi	ited Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
CLARINDA DEANE	
(Contact Person)	
RICHY RICH LLC	
(Firm/Company)	
3234 CLARK ROAD	
(Address)	
SARASOTA,FL 34231	
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
CLARINDA DEANE	at ( 941 ) 894-0414
(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
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 32301	Tallahassee, Florida 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: RIC	e limited liability company as i CHY RICH LLC	t appears on the records	of the Florida	ı Departı	ment —·
	oility company was organized to FLORIDA	under the laws of:	SEURE 14 TALL AHAS	2011 JUL -	<u> </u>
3. The Florida doc L1100002	ument/registration number of t 4567	his limited liability com	pany is: FLOR	Alboar va	ED
4. I, RICHARD	M DEANE	, hereby resign as a	MANAGE	Ř/MEN	ивег
(Print )	Name of Person Resigning)	,	(Print Ti		
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability company	y has been no	tified of	my
6000					
Signature of Res	igning Member, Managing Me	mber or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				