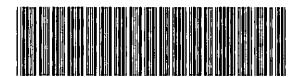
L110000029861

- Olea brank				
- Olga brank - 8300 Sw/b3ed Thuet - Palmetto Bay FL - 33154				
Palmetto Bay FL				
- 3 <i>3/</i> 5 <i>7</i>				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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December 21, 2022

OLGA GRANT 8300 SW 163RD STREET PALMETTO BAY, FL 33037

SUBJECT: REEF RUNAROUND LLC

Ref. Number: L11000029861

This will acknowledge receipt of your correspondence regarding the above referenced business entity.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with 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) 245-6939.

Letter Number: 022A00028559

Stacy Prather Regulatory Specialist III

· /=

Olga Grant 8300 SW 163rd Street Palmetto Bay, FL 33037 786-647-8076-cell

To Whom It May Concern:

Dear Sir/Madam,

Last year I filed a form Resignation or Dissociation of Member or Manager (PDF)

Also, I paid the Fee, but my name is still shown as an MGR for Reef Runaround LLC on today's date (see attached print from the website)

Reef Runaround LLC has only one registered agent and owner and MGR - Grant, Philip Michael

I have nothing to do with this LLC; please help me to remove my name.

Tapent 9/19/2022

Sincerely, Olga Grant

Ter 23 2022

NO.S

COVER LETTER

Division of Corporations	
SUBJECT: Reef Runaria (Name of	eend CCC
(Name of	Limited Liability Company)
The enclosed member, resignation or diss	sociation and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to:
(Contact Person)	
(Firm/Company)	·
(Address)	
(City/State and Zip Code)	
For further information concerning this n	natter, please call:
Philip M Grant	at (<u>305</u>) <u>498 - 3515</u> (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payab	ole to the Florida Department of State for:
XS25 Filing Fee CHUT/155	☐ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations The Centre of Tallahassee
P.O. Box 6327 Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
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Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company a Roef Runanoe	s it appears on the records of the Flo eu	orida Dep	partment
		ssigned to this limited liability com	pany is:	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is: _		
4.1. Olga GPrini N	GABUL (ame of Person Resigning)	, hereby withdraw/resign as a		
man	(Print Title)			
of this limited lia resignation in wr		he limited liability company has bec	n notifie	d of my
Olye	mant lighty issociating Member of Resig	,		
Signature of Di	issociating Member of Resig	gning Manager		
	•		2	202
Filing Fee:	\$25.00 (Required)			2023 JAN -6
Certified Copy:	\$30.00 (Optional)			<u> </u>
			f	9
			•	<u> </u>
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