

**L11000032085**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

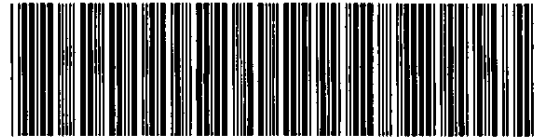
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**300290360813**

09/21/16--01016--017 \*\*25.00

16 SEP 21 AM 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 22 2016  
J. HARRIS



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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: REB Holdings, LLC

2. The Florida document/registration number assigned to this limited liability company is:

L11000032085

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9-14-16  
ultimate management group

4. I, Mendi Rosenberg, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MGRM  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]  
Signature of Dissociating Member or Resigning Manager

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

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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA