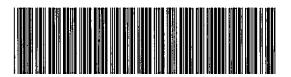
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(Re	equestor's Name)			
(Ac	ldress)			
(Ac	idress)			
(Ci	ty/State/Zip/Phone	⇒#) .		
PICK-UP	☐ WAIT	MAIL		
(Ві	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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rigin Risignation



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 as it appears on	the records of the Flor	ida Department
of State is: REA	L Internet and Mobile Marketing, LLC		
2. The Florida doci	ument/registration number assigned to this	limited liability compa	any is:
	mber/manager withdrew/resigned or will v	withdraw/resign is:	1/2014,
4. I, Judith A Kee	gan, hereby ame of Person Resigning)	withdraw/resign as a	
(Print N	ame of Person Resigning)	······································	To an I'd
MGMR			
	(Print Title)		
of this limited lial resignation in wr	pility company and affirm the limited liabi	lity company has been	notified of my
_ Qud	A. 1600		
Signature of Di	ssociating Member or Resigning Manager		
1	U		
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		

COVER LETTER

_	stration Section sion of Corporations					
SUBJECT:	REAL Internet and Mobile M	arketing, LLC	···			
The enclosed	d member, resignation or dissocia	ation and fee(s)	are submitted for filing.			
Please return	all correspondence concerning	this matter to:				
Robert Kee	egan					
-	(Contact Person)					
REAL Inter	net and Mobile Marketing, LL	С				
	(Firm/Company)	******				
14923 Oldi	nam Drive					
	(Address)					
Orlando, Fl	L 32826		•		4	
	(City/State and Zip Code)			agen and		**************************************
For further in	nformation concerning this matte	er, please call:		1 3 m	5	4
Robert Kee	egan	407	619-1968		======================================	
(N	lame of Contact Person)		& Daytime Telephone Num	iber)	ري پ	
Enclosed ple ■ \$25 Filing	ease find a check made payable to g Fee		epartment of State for: Fee & Certified Copy		-	

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

CR2E079 (2/14)

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

STREET/COURIER ADDRESS: