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Mr. 8 8 56.76.

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	RCJ HOPE, LLC (Name of Limited Liability C	'omnany)
	(Name of Limited Liability C	ompany)
The en	closed member, resignation or dissociation and fee	e(s) are submitted for filing.
Please	return all correspondence concerning this matter to	o:
Micha	el C. Hildebrandt, Esq.	
	(Contact Person)	
Hildeb	orandt Law Firm, LLC	
-	(Firm/Company)	
10300) 49th Street North, Suite #207	
	(Address)	_
Clean	water, FL 33762	2015 JUL 27 SECRETARY TALLAHASSE
	(City/State and Zip Code)	JUL AHA
For fur	ther information concerning this matter, please cal	IL 27 F
Micha	nel C. Hildebrandt, Esq. 727	329-0050
	(Name of Contact Person) (Area Co	de & Daytime Telephone Number) —
	ed please find a check made payable to the Florida Filing Fee \$\square\$	Department of State for: ng Fee & Certified Copy
	ET/COURIER ADDRESS:	MAILING ADDRESS:
_	ration Section on of Corporations	Registration Section Division of Corporations
	n Building	P.O. Box 6327
2661 E	Executive Center Circle assee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (2/14)



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)

of State is: RCJ		it appears on the records of	the Florida Department
2. The Florida docu L11000139901	-	ssigned to this limited liabili	ity company is:
3. The date this mer	nber/manager withdrew/res	igned or will withdraw/resig	gn is:
4. I, Carmen Ferguson (Print Name of Person Resigning)		hereby withdraw/resi	gn as a
(Print No	ame of Person Resigning)		
Member			
(Print Title)	,	
of this limited liab		ne limited liability company	7
e.	FY	·	2015 JUL 27 SECRETARY ALLAHASSE
Signature of Dis	ssociating Member or Resig	ming Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		I: IC