

L12000150970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** IBRFGF, LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Ian B. Russell

(Contact Person)

Ian Russell Co.

(Firm/Company)

20869 Gleneagles Links Drive

(Address)

Estero, FL 33928

(City/State and Zip Code)

For further information concerning this matter, please call:

Jay F. Cook

(Name of Contact Person)

at ( 239 ) 687-2400

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

*Check # 1145 1/31/14*

☒ \$25 Filing Fee

☐ \$55 Filing Fee &

Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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

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

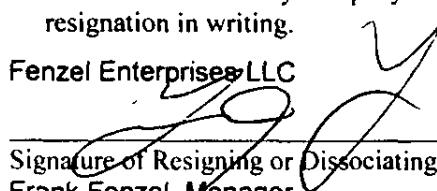
2. The Florida document/registration number of this limited liability company is:  
L12000150970

3. The date this member withdrew or will withdraw is: December 31, 2013

4. I, Fenzel Enterprises LLC, hereby resign as a Member  
*(Print Name of Person Resigning)* *(Print Title)*

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

Fenzel Enterprises LLC

  
\_\_\_\_\_  
Signature of Resigning or Dissociating Manager, Member  
Frank Fenzel, Manager

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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