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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Durings F. Man)				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				
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T CLINE :

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 5RQ B.D. LLC (Name of Limited Liability C	ompany)
The enclosed member, managing member or manager res filing.	ignation and fee(s) are submitted for
Please return all correspondence concerning this matter to):
(Contact Person)	
(Firm/Company)	
(Address)	
(City/State and Zip Code)	
For further information concerning this matter, please cal	1:
Paul 511Vka at (94) (Name of Contact Person) (Area Co	de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida \$25 Filing Fee	1 \$55 Filing Fee & Sin Z ∞ I
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	imited liability company as RQ B.D. LLC		
	ity company was organized	under the laws of:	
3. The Florida docum	ment/registration number of	this limited liability compa	any is:
4. 1, Vastiy	SAVA me of Person Resigning)	, hereby resign as a\	(Print Title)
of this limited liab resignation in writ	ility company and affirm the ing.	e limited liability company	has been notified of my
Signature of Rearg	ning Member, Managing M	lember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		2013 AU Secret Talland