L13000123138

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COVER LETTER

Registration Section TO: **Division of Corporations** Two Rubbing Nickels, LLC SUBJECT: (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: Mitchell Hyman (Contact Person) Two Rubbing Nickels, LLC (Firm/Company) 1316 Hampshire Place Circle (Address) Altamonte Springs, FL 32714-1250 (City/State and Zip Code) For further information concerning this matter, please call: Mitchell Hyman (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: **■** \$55 Filing Fee & Certified Copy □ \$25 Filing Fee Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303



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 a	s it appears on the recor	ds of the Florida	a Depa	rtment
of State is:	Rubbing Nickels, LLC				
2. The Florida docu	ment/registration number a	ssigned to this limited l	iability compan	y is:	
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	mber/manager withdrew/re			21ag.PR -9 PH	
Member	, , ,) . D	2 2 3	
	(Print Title)		3.3	56	
resignation in wr	bility company and affirm titing. A Member or Resi		pany has been n	otified	of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				