Uldaan

(Requ	uestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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15 NOV -5 PH 2: 47 SECRETARY OF STATE TALLAHASSEE, FLORIDA

NOV 0 6 2015

S. YOUNG



November 3, 2015

BY U.S. MAIL

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

RE

H&R Investment Group LLC

L14000009944

Dear Sir or Madam:

Enclosed please find the "Dissociation or Resignation of Member". Manager from Florida or Foreign Limited Liability Company" for the above mentioned LLC as well as check #4088 in the amount of \$25.00 for the filing fee.

Please do not hesitate to contact us if you have any questions or concerns.

Sincerely

Bennett A. Hutson

COVER LETTER

TO: Registration Section Division of Corporations		•
SUBJECT: H&R INVEST	MENT GRO	UP LLC
	ed Liability Com	pany)
The enclosed member, resignation or dissociate	ion and fee(s)	are submitted for filing.
Please return all correspondence concerning th	is matter to:	
CHRISTOPHER A. RIOS	3	
(Contact Person)		
		TALL HE SECRET
(Firm/Company)		विषेत्र ५ र
8452 SW 80th PLACE		19 P
(Address)		PN 2: 48 OF STATE C, TLONIDA
Gainesville, FL 32608		
(City/State and Zip Code)		
For further information concerning this matter	, please call:	
CHRISTOPHER A. RIOS	at (352	₎ 215-4557
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed please find a check made payable to ■ \$25 Filing Fee		
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

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)

1. The name of the	limited liability company as	it appears on the records of the I	Florida Departm	ent
of State is:	H&R INVESTMENT G	ROUP LLC		<u>_</u> .
2. The Florida doc	ument/registration number as	signed to this limited liability co	mpany is:	
L1400000994	4	·		
3. The date this me	ember/manager withdrew/resign	gned or will withdraw/resign is:	11/02/2015	_
4. I, Christon	oher B. Harris	, hereby withdraw/resign as	a≥a 5	
(Print N	lame of Person Resigning)		CRET	·**
Author	ized Member		33 7	_
	(Print Title)			T
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability company has b	een notified of	⊐ my
Signature of D	issociating Member or Resign	ning Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			