(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
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AUG 3 1 2016 S. YOUNG

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: Rodney's Repairs (Name of Limited)	Liability Company)	
The enclosed member, resignation or dissociation	n and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to:	
Joshua Harz (Contact Person)		
Rodney's Repairs LLC (Firm/Company)		TALLA
42109 Maggie Jones Rd.	AUG 30 AM II: 40	HASSEE, FL
Paisley, FL 32767 (City/State and Zip Code)		ORIDA
For further information concerning this matter, p	lease call:	
Name of Contact Person)	(864) 991-7263 (Area Code & Daytime Telephone Number)	
Ehclosed please find a check made payable to the S25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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 Florida Department	
of State is: Ro	idney's Repairs LLC	
2. The Florida docu	ment/registration number assigned to this limited liability company is:	
L1500006	4843	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 8/26/16	
4. I, Joshua (Print N	harz, hereby withdraw/resign as a fame of Person Resigning)	
AMBR	(Print Title)	C/D
of this limited lial resignation in wri	bility company and affirm the limited liability company has been notifie of my	THE TAP
	ssociating Member or Resigning Manager	ار در ا
G		
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	