

L15000135852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

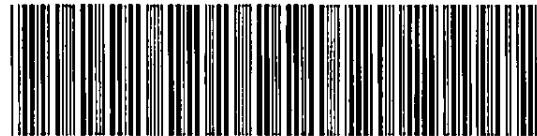
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/05/17--01036--005 **25.00

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17 SEP -5 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

SEP 07 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARCANDSRF 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:

Steven Ryan Freiden

(Contact Person)

(Firm/Company)

1501 Roscomare Ave

(Address)

Orlando FL 32806

(City/State and Zip Code)

For further information concerning this matter, please call:

Steven Ryan Freiden

(Name of Contact Person)

at (901) 356-3030

(Area Code & Daytime Telephone Number)

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

☒ \$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

**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: ARCANDSRF LLC

2. The Florida document/registration number assigned to this limited liability company is:
L15000135852

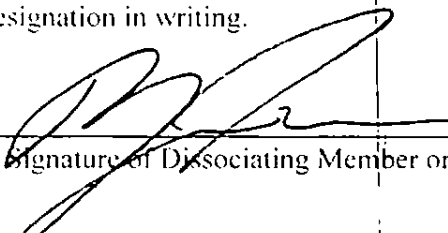
3. The date this member/manager withdrew/resigned or will withdraw/resign is: Sept 1, 2017

4. I, Steven Ryan Freiden, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager and Member

(Print Title)

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



Signature of Dissociating Member or Resigning Manager

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

FILED
17 SEP -5 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 1, 2017
Andrew Richard Clark
1264 Timberlane Road
Office #5
Tallahassee, FL 32312

Drew,

In accordance with the Operating Agreement of ARCANDSRF LLC, I am hereby resigning as an employee and withdrawing as a member of ARCANDSRF LLC and all associated entities. Effective immediately, I am no longer a member of the company. Please ensure I am removed from all accounts, legal filings, and documentation immediately.

Please let me know whether, pursuant to the Operating Agreement of ARC AND SRF LLC, you intend to proceed with the dissolution of the company and liquidation of its assets or, as the remaining member, to cause the existence of the company to continue.

Sincerely,



Steven Ryan Freiden