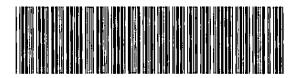
## L15000137027

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>e #)</del>
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

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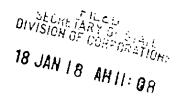
K. SALY JAN 1 9 2018

## **COVER LETTER**

	egistration Section ivision of Corporations				
SUBJEC	Removal of Manager				
SUBJEC		(Name of Limited Liability Company)			
The enclo	osed member, resignation or dis-	sociation and fee(	s) are submitted for filing.		
Please re	turn all correspondence concern	ing this matter to:			
Scott Pa	arker				
	(Contact Person)		_		
Regency	y Redux, LLC				
	(Firm/Company)		_		
2087 Inc	dian River Blvd				
	(Address)		_		
Vero Be	ach, FL 32960				
	(City/State and Zip Code)		<del></del>		
For further	er information concerning this n	natter, please call:			
Scott Pa	nrker	772 at (	766-3333		
	(Name of Contact Person)		& Daytime Telephone Number)		
Enclosed ☐ \$25 Fi	please find a check made payab ling Fee		Department of State for: g Fee & Certified Copy		
	COURIER ADDRESS:		MAILING ADDRESS:		
	ion Section		Registration Section		
Clifton B	of Corporations		Division of Corporations P.O. Box 6327		
	cutive Center Circle		Tallahassee, Florida 32314		
	ee. Florida 32301		rananassee, rionda 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)

	limited liability company as it appears on the records of the Florida Department ency Redux, LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
3. The date this me 4. I, Bonilla, Carlo (Print N	ember/manager withdrew/resigned or will withdraw/resign is: 1/18/2018  os J  , hereby withdraw/resign as a  lame of Person Resigning)
MGR	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of Di	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)