## L16000181866

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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B. CHATHAM 0 AUG 1 1 2023

2023 JUH 26 PH 4: 32

## **COVER LETTER**

Division of Corporations	
RR DEVELOPMENT OF PB SUBJECT:	LLC
	of Limited Liability Company)
The enclosed member, resignation or d	issociation and fee(s) are submitted for filing.
Please return all correspondence concer	rning this matter to:
RENEE BOUTILIER	
(Contact Person)	
RR DEVELOPMENT OF PB LLC	
(Firm/Company)	
4053 SW RIVERS END WAY	
(Address)	<del></del>
PALM CITY, FL 34990	
(City/State and Zip Code)	
For further information concerning this	matter, please call:
RNEE BOUTILIER	561 707-1205 at ( )
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
	rable to the Florida Department of State for:
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section Division of Corporations
Division of Corporations P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
,	Tallahassee FL 32303

CR2E079 (2/14)

TO: Registration Section



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

2023 JUH 26 PH 4: 32

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	e limited liability company as it appears on the records of the Florida Department
of State is: RR D	EVELOPMENT OF PB LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
L16000181866	
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: Sure 19, 2023
4. I, DOINA TOMA	, hereby withdraw/resign as a
(Print )	, hereby withdraw/resign as a lame of Person Resigning)
MGR	
	(Print Title)
of this limited lia resignation in wi	bility company and affirm the limited liability company has been notified of my iting.
	Mao
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)