

L16000228479

(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



700345478397

06/02/20 700345478397 **67.50
RECEIVED

JUN 1 2020

JUN 18 2020
S. YOUNG

STATE DEPT OF STATE
OFFICE OF CORPORATIONS
1111 K STREET, N.W.
WASHINGTON, D.C. 20540

2020 JUN -1 AM 6:38

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RJ Empire LLC
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: L16000228479

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Rafael J Garcia Martinez
Contact Person

RJ Empire LLC
Firm/Company

1070 W. Embassy Dr.
Address

De Hona FL 32725
City, State, and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rafael Garcia Martinez (786) 317-8956
Name of Contact Person Area Code and Daytime Telephone Number

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

\$87.50 Filing Fee \$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

INHS16 (01/06)



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)

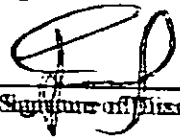
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: RI Empire LLC

2. The Florida document/registration number assigned to this Limited Liability company is: L16000228079

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/30/20

* 4. Jessica James Rojas hereby withdraw/resign as a
(Print Name of Person Resigning)
Manager
(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)

0326079 (2/14)

FILED
2020 JUN -1 AM 6:38