15	7000084	99

(Re	questor's Name)			
(Ad	dress)	<u> </u>		
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP		MAIL		
(Bu	siness Entity Nam	ie)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
Office Use Only				



05/08/18--01012--018 **25.00

RECEIVED MAY 0 7 2018

> FILED 18 MAY -7 PH 1: 04 SECRETARY OF STATE SECRETARY OF STATE

K SALY MAY 1 1 ZO18

COVER LETTER

TO: Registration Section Division of Corporations

Rhino Smacker Press, LLC SUBJECT:

(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:

Sharon E. Johnson

(Contact Person)

Rhino Smacker Press. LLC

(Firm/Company)

25815 Arundel Way

(Address)

Sorrento, FL 32776

(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon E. Johnson	352	217-7841
	_ at (_)
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: \$25 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

CR2E079 (2/14)



FILED 18 MAY -7 PM 1:05 SECULIARY OF STATE

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: _____
- 2. The Florida document/registration number assigned to this limited liability company is: L17000008499
- 3. The date this member/manager withdrew/resigned or will withdraw/resign is: _____
- 4. I. _____

Kimberlee H. Esselstrom _____, hereby withdraw/resign as a _______, hereby withdraw/resign as a ________, hereby withdraw/resign as a ________, hereby withdraw/resign as a ________.

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)