47000134697

(Requestor's Name)		
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PICK-UP WAIT MAIL		
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TO:

CR2E079 (2/14)

Registration Section

Division of Corporations R & B PAINTING CO. OF HERNANDO COUNTY, 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: BENITEZ, BARBARA J (Contact Person) R & B PAINTING CO. OF HERNANDO COUNTY, LLC (Firm/Company) 2007 MEREDITH DRIVE (Address) SPRING HILL, FL 34608 (City/State and Zip Code) For further information concerning this matter, please call: BENITEZ, BARBARA J (Area Code & Daytime Telephone Number) (Name of Contact Person) 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: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



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: R & B PAINTING CO. OF HER	RNANDO COUNTY, LLC
2. The Florida document/registration number as	signed to this limited liability company is:
L17000134697	ALL.
3. The date this member/manager withdrew/resi	gned or will withdraw/resign is:
4. I,	, hereby withdraw/resign as a , ,
(Print Name of Person Resigning)	, hereby withdraw/resign as a
Authorized Member	ENA W
(Print Title)	<i>*-</i> (
of this limited liability company and affirm the resignation in writing.	e limited liability company has been notified of my
Signature of Dissociating Member or Resign	ning Manager
Filing Fee: \$25.00 (Required)	
Certified Copy: \$30.00 (Optional)	