117000193513

(Red	uestor's Name)	
(Add	ress)	<u> </u>
(Add	lress)	
(City	/State/Zip/Phone	e #)
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SECRETARY OF STATE
ALLAHASSEE FLORIDA

K SALY APR 16 2018

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: SOLD 123, LLC		
(Name of Limited Liab	ility Company)	
The enclosed member, resignation or dissociation ar	nd fee(s) are submitted for filing.	
Please return all correspondence concerning this man	tter to:	
RH RICHARDS		
(Contact Person)		
SOLD 123, LLC		
(Firm/Company)		
151 SOUTHHALL LANE #230		
(Address)		
MAITLAND, FL 32751		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
RH RICHARDS 40		
	ea Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Floral \$25 Filing Fee □ \$55	orida Department of State for: 5 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 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)

1. The name of the lim of State is:	ited liability company as it appears on the records of the Florida Department 23, LLC
2. The Florida docume L17000193513	nt/registration number assigned to this limited liability company is:
	er/manager withdrew/resigned or will withdraw/resign is:
(Print Name	V FIRM, PA (LH Richards), hereby withdraw/resign as a of Person Resigning)
	y company and affirm the limited liability company has been notified of my
Signature of Dissoc	ciating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)