

L17000 214 145

(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



400337897574

12/16/19--01018--019 \*\*25.00

19 DEC 16 AM 9:22  
CLERK OF SUPERIOR COURT  
STATE OF CALIFORNIA

JAN 17 2020  
C McNAIR

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RD TILE AND STONE LLC  
(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:

CAMILO ESPINOSA

(Contact Person)

LOGICA PA

(Firm/Company)

40 SW 13TH ST., SUITE 102

(Address)

MIAMI / FLORIDA 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

CAMILO ESPINOSA

(Name of Contact Person)

at (786)

2929704

(Area Code & Daytime Telephone Number)

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

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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

RECEIVED  
DIVISION OF CORPORATIONS  
19 DEC 16 AM 9:22



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

RECEIVED  
DIVISION OF CORPORATIONS  
19 DEC 16 AM 9:22

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**  
(Pursuant to 605.0216, Florida Statutes)

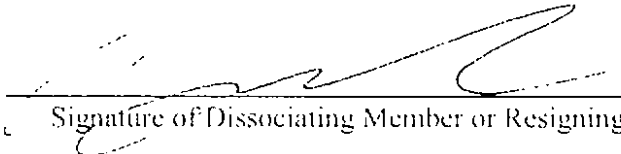
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: RD TITLE AND STONE LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L17000214145

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/05/2019

4. I, DAVID CUENCA, 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)