

# Florida Department of State

## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP  
Account Number : I20120000055  
Phone : (407)898-1757  
Fax Number : (407)897-5336

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Customer@abkcorp.com

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RED OLIVE LLC

Certificate of Status	0
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Corporate Filing Menu

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SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RED OLIVE 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:

STEPHANIE CASTRO

\_\_\_\_\_  
(Contact Person)

ACCOUNT BOOKKEEPING CORP

\_\_\_\_\_  
(Firm/Company)

5301 CONROY RD, STE 140

\_\_\_\_\_  
(Address)

ORLANDO, FL 32811

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHANIE CASTRO

at ( 407 ) 898-1757

\_\_\_\_\_  
(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

☐ \$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



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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2020 NOV 25 PM 4:18

SECRETARY OF STATE  
TALLAHASSEE, FL

**DISSOCIATION OR RESIGNATION OF MEMBER, MANA  
FLORIDA OR FOREIGN LIMITED LIABILITY COM**  
(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the  
of State is: RED OLIVE LLC

2. The Florida document/registration number assigned to this limited liability c  
L18000041830

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

4. I, CRISTIANE R DE OLIVEIRA REDUA, hereby withdraw/resign a  
(Print Name of Person Resigning)

AMBR  
(Print Title)

of this limited liability company and affirm the limited liability company has  
resignation in writing.

Cristiane Regina de Oliveira  
Signature of Dissociating Member or Resigning Manager