118000224868

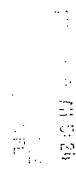
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(0.0,000.00.00.00.00.00.00.00.00.00.00.00			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Certified copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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03/19/24--01020--014 ++25.00







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 li	mited liability company as it appears on the recor	rds of the Florida Department
of State is:R	OWBERN, LLC	
	nent/registration number assigned to this limited l	liability company is:
83-63	25068 L18000224368	
3. The date this mem	ber/manager withdrew/resigned or will withdraw	/resign is: 3/8/24
4. I, Laurice (Print Nam	ne of Person Resigning), hereby withdraw	v/resign as a
Marag	Hnt Title)	
of this limited liabil	lity company and affirm the limited liability company.	pany has been notified of my
- Anuri	2 Moullet	
Signature of Diss	sociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	150
		•

CR2E079 (2/14)

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ROWBERN LLC (Name of Limited Liability)	Company)
The enclosed member, resignation or dissociation and fe	ee(s) are submitted for filing.
Please return all correspondence concerning this matter	to:
Laurie Moulliet (Contact Person)	
Voorhees Family RVOC Tru	ust
919 Wee Burn Pl (Address)	<u>. </u>
Sarasota EL 34243 (City/State and Zip Code)	
For further information concerning this matter, please ca	ill:
Name of Contact Person) at (94) (Area Co	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid \$\sum{2}\$ \$25 Filing Fee \$\sum \$55 F	a Department of State for: ling 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