L19000015168

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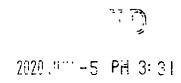
Registration Section

TO:

Division of Corporations Richie's Metalworks, 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: Richard Birchfield (Contact Person) Richie's Metalworks, LLC (Firm/Company) 40863 River Rd (Address) Dade City, FL 33525 (City/State and Zip Code) For further information concerning this matter, please call: Richard Birchfield (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:** Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303





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)

	limited liability company as it appears on the records of the Florida Department ie's Metalworks, LLC
2. The Florida doc L19000015168	ument/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
4. I, Cynthia Dyal	, hereby withdraw/resign as a dame of Person Resigning)
Manager	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Can	the aQ
Signature of D	ssociating Member or Resigning Manager
	\$25.00 (Required) \$30.00 (Optional)
Certified Copy:	\$30.00 (Optional)