## 120000002607

| (Requestor's Name)                      |
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|   |
| (Address)                               |
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| (Address)                               |
| (Addiess)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| <b>10</b>                               |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
| Special manucions to raining officer.   |
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Office Use Only



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C. J. W. J. W. J. 19. 12.

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## **COVER LETTER**

| _                                     | stration Section<br>sion of Corporations |                      |  |
|---------------------------------------|--|----------------------|--|
| DIVE                                  | sion of Corporations                     |                      |  |
| SUBJECT:                              | ROCA SVC LLC                             |                      |  |
|                                       | (Name of                                 | Limited Liability Co | mpany)   |
| The enclosed                          | d member, resignation or dis             | sociation and fee(   | s) are submitted for filing.                           |
| Please return                         | all correspondence concern               | ning this matter to: | :  |
| CARLOS RO                             | NDON                                     |                      |  |
|                                       | (Contact Person)                         | •                    | _  |
|                                       |  |                      | _  |
|                                       | (Firm/Company)                           |                      |  |
| 9871 NW 52 T                          | TER                                      |                      |  |
| · · · · · · · · · · · · · · · · · · · | (Address)                                |                      | _  |
| MIAMI, FL 33                          | 3178                                     |                      |  |
|                                       | (City/State and Zip Code)                |                      | _  |
| For further in                        | nformation concerning this r             | natter, please call: | :  |
| CARLOS RO                             | NDON                                     | 305<br>at (          | 504-1967   |
| (N                                    | ame of Contact Person)                   |                      | e & Daytime Telephone Number)                          |
| Enclosed ple                          | ase find a check made payab              | ble to the Florida I | Department of State for:                               |
| □ \$25 Filing                         |  |                      | g Fee & Certified Copy                                 |
| <u>Mailir</u>                         | ng Address:                              |                      | Street Address:  |
| Regis                                 | stration Section                         |                      | Registration Section                                   |
|                                       | sion of Corporations                     |                      | Division of Corporations                               |
|                                       | Box 6327<br>hassee, FL 32314             |                      | The Centre of Tallahassee                              |
| Talla                                 | 118800, FL 32314                         |                      | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |



2. 10 10 to 8: Uz

## 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)

|  | e limited liability company as it appears on the records of the Florida Department  A SVC LLC |
|--|---|
| 2. The Florida doc<br>L20000002607       | ument/registration number assigned to this limited liability company is:                      |
| 3. The date this me                      | ember/manager withdrew/resigned or will withdraw/resign is:                                   |
| 4. I                                     | . hereby withdraw/resign as a same of Person Resigning)                                       |
| PRESIDENT, M                             |   |
| ·  | (Print Title)   |
| of this limited lia<br>resignation in wr | bility company and affirm the limited liability company has been notified of my iting.        |
| Signature of D                           | issociating Member or Resigning Manager   |
| Filing Fee:<br>Certified Copy:           | \$25.00 (Required)<br>\$30.00 (Optional)  |