## LZ0000038585

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## **COVER LETTER**

| TO:    | _                  | stration Section                |                                       |  |
|--------|--------------------|---------------------------------|---------------------------------------|--|
|        | DIVE               | sion of Corporations            |                                       |  |
| SUBJ   | IECT:              | RUDRA INVESTMENTS REALT         | Y LLC                                 |  |
|        |                    | (Name of Li                     | mited Liability Co                    | ompany)  |
| The e  | nclosed            | d member, resignation or disso  | ciation and fee                       | (s) are submitted for filing.                          |
| Please | e returr           | all correspondence concerning   | g this matter to                      | <b>:</b>   |
| Viktor | riya Goy           | al                              |                                       |  |
|        |                    | (Contact Person)                |                                       | <del></del>  |
| RUDE   | ra invi            | ESTMENTS REALTY LLC             |                                       |  |
|        |                    | (Firm/Company)                  | · · · · · · · · · · · · · · · · · · · | <del>_</del>   |
| 7601 ( | Orange T           | ree In                          |                                       |  |
|        |                    | (Address)                       |                                       | _  |
| Orland | do, FL 3           | 2819                            |                                       |  |
|        |                    | (City/State and Zip Coxle)      |                                       |  |
| For fi | ı <b>r</b> ther ii | nformation concerning this ma   | tter, please call                     | l:   |
| Viktor | iya Goy            | al                              | 321<br>aı (                           | 2789564  |
|        | (N                 | lame of Contact Person)         |                                       | le & Daytime Telephone Number)                         |
| Enclo  | sed ple            | ease find a check made payable  | to the Florida                        | Department of State for:                               |
|        | 5 Filin            |                                 |                                       | ng Fee & Certified Copy                                |
|        | Maili              | ng Addmers                      |                                       | Street Address:  |
|        |                    | ng Address:<br>stration Section |                                       | Registration Section                                   |
|        | _                  | sion of Corporations            |                                       | Division of Corporations                               |
|        | P.O.               | Box 6327                        |                                       | The Centre of Tallahassee                              |
|        | Talla              | hassee, FL 32314                |                                       | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |

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## 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 RA INVESTMENTS REALTY LLC |
|---|--|
| 2. The Florida doc<br>L20000038585      | ument/registration number assigned to this limited liability company is:                                   |
| 3. The date this me                     | ember/manager withdrew/resigned or will withdraw/resign is:  |
| Raineach Goval                          | , hereby withdraw/resign as a lane of Person Resigning)  |
| AMBR                                    |  |
|   | (Print Title)  |
| of this limited lia<br>resignation in w | 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)   |