L21000376426

(Requestor's Name)			
(Address)			
(,,			
(Address)			
(City/State/Zip/Phone #)			
☐ 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



500415964905

00 70 70 -01000 -010 ++50.00



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	limited liability company as	s it appears on the records of the Florida Department
of State is: RC GI	ROUP LLC	·
2. The Florida docu	ment/registration number a	ssigned to this limited liability company is:
L21000376426		•
3. The date this men	mber/manager withdrew/res	signed or will withdraw/resign is:
4. I, KIMBERLY M. RYMER (Print Name of Person Resigning)		hereby withdraw/resion as a
(Print No	ume of Person Resigning)	, neredy withdrawnessgn as a
MANAGER		
	Print Title)	
of this limited liab resignation in wri	• • •	ne limited liability company has been notified of my
Vinler	W-Xyme	~/
/ Signature of Dis	ssociating Member or Resig	ning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	