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





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1/10/2022

TO: JENNIFER RYAN MARAIA, MEMBER OF JENNIFER RYAN MARAIA, LLC

FROM: ROBERT A MARAIA, MEMBER OF JENNIFER RYAN MARAIA, LLC

Jennifer,

I hereby resign from JENNIFER RYAN MARAIA, LLC, effective 1/11/2022.

Sincerely,

Robert A Maraia

Received and acknowledged on 1/10/2022

Jennifer,ŔyanyMaraia

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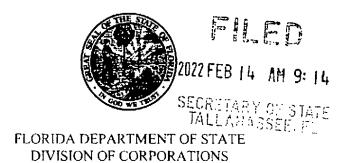
COVER LETTER

TO: Registration Section Division of Corporations JENNIFER RYAN MARAIA, 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: JENNIFER MARAIA (Contact Person) JENNIFER RYAN MARAIA, LLC (Firm/Company) 1199 S FEDERAL HWY, UNIT 361 (Address) BOCA RATON, FL 33432 (City/State and Zip Code) For further information concerning this matter, please call: JENNIFER MARAIA 561 609-5350 at ((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

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

I. The name of the limited liability composition of State is:	cany as it appears on the records of the Florida Department
2. The Florida document/registration nur L21000418259	nber assigned to this limited liability company is:
ROBERT A MARAIA	ew/resigned or will withdraw/resign is:
(Print Name of Person Resigning) MEMBER	, hereby withdraw/resign as a
of this limited liability company and af resignation in writing. Signature of Dissociating Member or	firm the limited liability company has been notified of my Resigning Manager

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee: Certified Copy: