

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				
J.DENNIS				





10/28/24~-01020--018 **25.10



COVER LETTER

Division of Corporations		
GLUD LO GOD DWS Land Holdings 11 C		
SUBJECT: RWS Land Holdings, LLC (Name of	f Limited Liability Co	ompany)
The enclosed member, resignation or dis	ssociation and fee	(s) are submitted for filing.
Please return all correspondence concerr	ning this matter to) :
Steven Aitken		
(Contact Person)		
RWS Land Holdings, LLC		
(Firm/Company)		
5205 Gulf Breeze Pkwy		
(Address)		
Gulf Breeze, Fl. 32563		_
(City/State and Zip Code)		
For further information concerning this i	matter, please cal	l:
Steven Aitken	at (<u>850</u>) 499-8838
(Name of Contact Person)	(Area Coo	le & Daytime Telephone Number)
Enclosed please find a check made paya ☐ \$25 Filing Fee		Department of State for: ng 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

TO: Registration Section



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	it appears on the records o	of the Florida Department	
of State is: RWS	Land Holdings, LLC		·	
2. The Florida doc	ument/registration number as	ssigned to this limited liabi	lity company is:	
L22000166825				
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resi	ign is: 10/22/2024	
		, hereby withdraw/resign as a		
(Print N	'ame of Person Resigning)			
Manager	(Print Title)			
of this limited lia resignation in wr	bility company and affirm thiting.	ne limited liability company	y has been notified of my	
Meus Signature of Di	SA JACKMAN issodiating Member or Resig	ning Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		FILEI 2024-0CT 28 P SECNETARY OF	