L23000238096

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer.			
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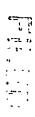
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2024 SEP 17 AT10: 2



COVER LETTER

Division of Corporations SUBJECT: RQ PROPERTY INVESTMENTS LLC (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: David Djebelli, Esq. (Contact Person) Law Offices of David Djebelli, P.A. (Firm/Company) 2100 Coral Way Ste PH 701 (Address) Miami, FL 33145 (City/State and Zip Code) For further information concerning this matter, please call: at (305) 661-3908 (Area Code & Daytime Telephone Number) David Djebelli, Esq. (Name of Contact Person) 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 The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)

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 li	imited liability company as it ap	pears on the records of the Florida Department
of State is: RQ	PROPERTY INVESTMENTS	S LLC S
2. The Florida docum	ment/registration number assign	ed to this limited liability company is:
L23000238096		·
3. The date this mem	nber/manager withdrew/resigned	or will withdraw/resign is: Roberto Quinones
4. I. Roberto Quinones, hereby withdraw/resign as a		, hereby withdraw/resign as a
-	lanager (MGRM)	
of this limited liabi resignation in writi	• • •	ited liability company has been notified of my
Signature of Diss	sociating Member or Resigning	Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	