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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
2015				
J. HORNE				
JUL 19 2024				
]				

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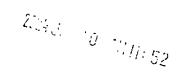
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COVER LETTER

TO:	~	stration Section			
	DIVIS	sion of Corporations			
SUBJ	ECT:	RIO VISTA DREAMS LLC (Name of Limited Liability Company)			
The er	iclosec	I member, resignation or dis	sociation and fee	(s) are submitted for filing.	
Please	return	all correspondence concern	ning this matter to):	
Whitne	y Dutto	n			
		(Contact Person)		_	
		(Firm/Company)			
1320 S	W 18th	Court			
		(Address)		····	
Fort La	uderdal	e FL 33315			
		(City/State and Zip Code)			
For fu	rther in	nformation concerning this r	natter, please call	l:	
Whitne	y Duno	n	954 at (614-6517	
	(N	ame of Contact Person)	(Area Cod	le & Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payat	ole to the Florida	Department of State for:	
= \$25	Filing	; Fee	□ \$55 Filir	ng Fee & Certified Copy	
	<u>Mailin</u>	og Address:		Street Address:	
	Regis	tration Section		Registration Section	
		ion of Corporations		Division of Corporations	
		Box 6327 nassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
	ı dildi	ивысс, Г. 1. 32314		Tallahassee, FL 32303	





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)

RIO	limited liability company as it appears on the records of the Florida Departmen
2. The Florida doc	ment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
4. I. Arber Balani (Print)	, hereby withdraw/resign as a ame of Person Resigning)
MGR	
of this limited lia resignation in w	Print Title) pility company and affirm the limited liability company has been notified of my ting.
Signature of D	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)