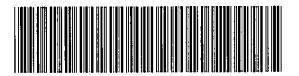
## L23000337365

(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
Office Use Only



500424292125

24 FEB 29 AM 9:

נטנז | בט ל /

RECEIVE

## **COVER LETTER**

Division of Corporations	
SUBJECT: River & Ranch LLC	
	cimited Liability Company)
The enclosed member, resignation or disse	ociation and fee(s) are submitted for filing.
Please return all correspondence concernit	ng this matter to:
Darius L. Cochran	
(Contact Person)	
River & Ranch LLC	
(Firm/Company)	<del></del>
17610 Taylor Rd	
(Address)	
Alva. FL 33920	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
Darius L. Cochran	239 872-7653 at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable	
S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassec, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624 Please use funds from this account: 12021000160: \$25.00 Authorization Signature: Leus Fills River & Ranch LLC Business Document # Pick up time Walk in Mail out Will wait \_\_\_\_ Certified copy of articles Certificate of Status <u>NEW FILINGS</u> <u>AMMENDMENTS</u> \_\_\_ Profit \_\_ Amendment Not for Profit Resignation of R.A. Officer/Director \_\_\_ Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal \_\_\_Other \_\_\_ Merger \_\_ CORP Conversion LLLP **OTHER FILINGS** REGISTERATION/QUALIFICATIONS \_\_\_ Foreign filing Annual Report \_\_\_\_Limited Partnership Fictitious Name Reinstatement \_\_\_\_ APOSTIL \_\_ Other

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

EXAMINER'S INITIALS:



February 28, 2024

FLORIDA CAPITAL COURIER SERVICES

SUBJECT: RIVER & RANCH LLC Ref. Number: L23000337365

We have received your document for RIVER & RANCH LLC and your check(s) totaling S. However, the enclosed document has not been filed and is being returned for the following correction(s):

Verify the name of the person resigning there is no Amanda S Cochran.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 524A00004367





## 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)

	limited liability company as & Ranch LLC	s it appears on the records of the	Florida D	epart	ment
		ssigned to this limited liability co	ompany is	s:	
		signed or will withdraw/resign is:	02/27/202	.4	<del></del>
4. I. Amanda F Cochi	I. Amanda F Cochran, hereby withdraw/resign as a, hereby withdraw/resign as a,				
AMBR					
	(Print Title)				
resignation in wr	iting.	ne limited liability company has b			f my
Filing Fee:	ssociating Member or Resig \$25.00 (Required) \$30.00 (Optional)	ning Manager	EE.F	2024 FEB 29 AM 9: 0:	