L23000424002

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SECRETARY OF STATE

COVER LETTER

SUBJECT: KOBINSON & YARBROUGH L.L.C.

(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:

Latoya Robinson—Parbrough

(Contact Person)

ROBINSON & YARBROUGH L.L.C.

(Firm/Company)

TH20 Maple Tree Drive

(Address)

Jacksonville FL 3007

(City/State and Zip Code)

For further information concerning this matter, please call:

Latoya Robinson—Yarwough (904) 763-8905

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

Mailing Address:

\$25 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

☐ \$55 Filing Fee & Certified Copy

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO:

Registration Section
Division of Corporations





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 of the Florida Department of State is: Robinson & Varbrough L.L.C. 2. The Florida document/registration number assigned to this limited liability company is: L23000424002
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09-12-23
4. I, Bernie G. Jarbrough, hereby withdraw/resign as a
MGR (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Ben E YAngl
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)