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COVER LETTER

TO: Registration Section Division of Corporations **R&B PROPERTY MANAGEMENT LLC** SUBJECT: (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 M. MCDONALD, ESQ. (Contact Person) MCDONALD & MCDONALD, P.A. (Firm/Company) P O BOX 669122 (Address) MIAMI, FL 33166-9428 (City/State and Zip Code) For further information concerning this matter, please call: DAVID M. MCDONALD (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Street Address: Mailing 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)



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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)

	e limited liability company as it appears on the records of the Flor	rida Department	
of State is: R&B	B PROPERTY MANAGEMENT LLC	<u></u> .	
2. The Florida doci	cument/registration number assigned to this limited liability comp	oany is:	
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:1	0/15/2023	
RONY CHARL	.ES harshy withdraw/racign as a	haraby withdraw/ragins as a	
(Print 8	Name of Person Resigning) , hereby withdraw/resign as a		
MGR			
	(Print Title)		
of this limited lia resignation in wr	ability company and affirm the limited liability company has beer riting.	i notified of my	
Signature of D	Dissociating Member or Resigning Manager		
Filing Fee:	\$25,00 (Required)		
Certified Conv.	\$30.00 (Optional)		