P99000058948	
RETAIL DISTRIBUTORS, LLC 951 BROKEN SOUND PKWY NW STE 195 BOCA RATON, FL 33487	80009484998
(City/State/Zip/Phone #)	12/19/11201039006 **35.00
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	SECRETAR 2002 DEC 19
	9 PM 4: 30 HESign
	Resign
Office Use Only	
	11102

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TDC

OFFICER / DIRECTOR RESIGNATION

I. Linde Rogi hereby resign as

INZ DEC

9

PH 4:

of VVRHOLDINGS, INC. (Name of Corporation)

a corporation organized under the laws of the State of ______

and affirm that the corporation has been notified in writing of the resignation.

ing officer/director) Signature of resign

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314