

L14000024326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

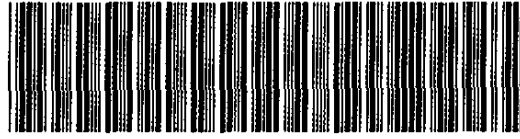
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/19/14--01013--004 \*\*25.00

14 MAY 19 PM 1:25  
SECRETARY OF  
TALLAHASSEE COUNTY

APPROVED  
AND  
FILED

C. LEWIS  
JUN 2 2014  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KENLOR TRANSPORT, LLC  
(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:

**THOMAS P KENT**  
\_\_\_\_\_  
(Contact Person)

**KENLOR TRANSPORT, LLC**  
\_\_\_\_\_  
(Firm/Company)

**130 LAKE CALOOSA LNDG.**  
\_\_\_\_\_  
(Address)

**FROSTPROOF, FL 33843**  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

**THOMAS P KENT** at 863 528-6370  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

- \$25 Filing Fee                       \$55 Filing Fee & Certified Copy

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

APPROVED  
AND  
FILED

14 MAY 19 PM 1:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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: KENLOR TRANSPORT, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L14000024326

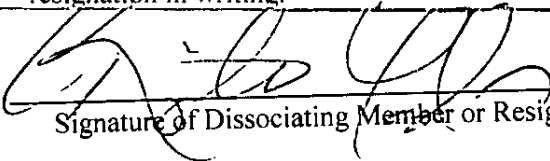
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 03/23/2014

4. I, REGINALD M. TAYLOR, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MGRM

*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)