## L22000206988

<u> </u>		
(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
- (Ru	siness Entity Nar	ne)
(00.	Siliess Ellicity Ivali	110)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filina Officer:	
Special instructions to 1 ming officer.		
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Office Use Only



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Dissociation

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## **COVER LETTER**

TO: Registration Section			
Division of Corporations			
SUBJECT: KPS Market LLC			
(Name of Limite	ed Liability Co	ompany)	
The enclosed member, resignation or dissociat	ion and fee	(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to	<b>)</b> :	
Phalla Tor			
(Contact Person)		_	
KPS Market LLC			
(Firm/Company)			
5857 University Blvd W			
(Address)		_	
Jacksonville FL 32216			
(City/State and Zip Code)			2013
For further information concerning this matter	, please cal	l:	;
Beaunard Yi	904 at (	226-9016	ر :
(Name of Contact Person)	\	de & Daytime Telephone Number)	
Enclosed please find a check made payable to   \$\Bigs \$25\$ Filing Fee		Department of State for:	က
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810

CR2E079 (2/14)



## 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 it appears on the	
2. The Florida doc L22000206988	ment/registration number assigned to this l	imited liability company is:
Beaunard Yi	mber/manager withdrew/resigned or will w	
4. 1,	, hereby w	vithdraw/resign as a
(Print A	ame of Person Resigning)	1 - 1
MGR		
	(Print Title)	1
of this limited lia resignation in wr	cility company and affirm the limited liabiliting.	ty company has been notified of my
Signature of Di	sociating Member or Resigning Manager	<del></del>
Filing Fee:	\$25.00 (Required)	
Certified Copy:	The state of the s	