KOZOCOCIŦCŦC

Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) ertified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)
(City/State/Zip/Phone #)	(Address)
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL     (Business Entity Name)     (Document Number) ertified Copies Certificates of Status Special Instructions to Filing Officer:	(2001633)
(Business Entity Name) (Document Number) ertified Copies Certificates of Status Special Instructions to Filing Officer:	(City/State/Zip/Phone #)
(Document Number) ertified Copies Certificates of Status Special Instructions to Filing Officer:	
ertified Copies Certificates of Status Special Instructions to Filing Officer:	(Business Entity Name)
Special Instructions to Filing Officer:	(Document Number)
	Certified Copies Certificates of Status
	Special Instructions to Filing Officer:
	Office Use Only



11/16/20--01008--018 \*\*25.

S TALLENI

2020 NOV 16 AH 10: 00





**TO:** Registration Section Division of Corporations

Kay Diamond Products, 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:

John Kay

(Contact Person)

Kay Diamond Products, LLC

(Firm/Company)

1080 Hoffand Drive, Suite 2

(Address)

Boca Raton, FL 33487

(City/State and Zip Code)

For further information concerning this matter, please call:

John Kay		561 at (	994-5400
(Name of Con	tact Person)	(Area Code	& Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: 25 Filing Fee Scertified Copy

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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)

- 2. The Florida document/registration number assigned to this limited liability company is: 1.02000017070
- 3. The date this member/manager withdrew/resigned or will withdraw/resign is:
- Robert Gow 4. I.

(*Print Name of Person Resigning*), hereby withdraw/resign as a

Managing Member

(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)

2020 NOV 16 AH 10: 00

CR2E079 (2414)