## 104000015647

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## **COVER LETTER**

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: Docks 4 Less (Name of Limited Liab	ility Company)
The enclosed member, managing member or managiling.	er resignation and fee(s) are submitted for
Please return all correspondence concerning this ma	tter to:
David Keith (Contact Person)	
	A A A A A A A A A A A A A A A A A A A
(Firm/Company)	
PO 130X 401 (Address)	
Carrabelle, FL 32322 (City/State and Zip Code)	144 (17) 75-
For further information concerning this matter, plea	se call:
David Keith at (Same of Contact Person) at (Ar	ea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the F \$25 Filing Fee	lorida Department of State for:  \$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



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

		s it appears on the records of the Flo	orida Department
of State is:	CKS 4 Less,	LLC	-1 N .
	ility company was organize		2013 DEC 17 P
3. The Florida docu	ment/registration number of	of this limited liability company is:	PM 1: 29
4. 1, Sylvia	Keith	, hereby resign as a MG(	rint Title)
	oility company and affirm t	he limited liability company has bee	
Signature of Resignature	gning Member, Managing	Member or Manager	
Filing Fee:			