

L05000033048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

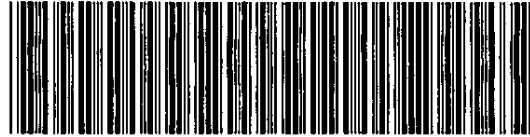
(Business Entity Name)

(Document Number)

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FILED
2015 OCT -1 PM 12:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

OCT 05 2015
J. HARRIS

September 28, 2015

Registration Section
Florida Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

McCARTHY
SUMMERS
BOBKO
WOOD
NORMAN
BASS
& MELBY P.A.
Attorneys at Law

Re: Resignation of Michael Matakaetis from Kitterman, LLC

Gentlemen:

In connection with the above named limited liability company, enclosed please find a Cover Letter and Dissociation/Resignation of Member/Manager. A check in the amount of \$25.00 is enclosed for the filing fee

Thank you for your assistance in this matter. Should you require any additional information, please do not hesitate to call me.

Sincerely,



Susan DeChristofaro
Paralegal
sde@mccarthysummers.com

Enclosure

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Terence P. McCarthy*
Robert P. Summers*
Noel A. Bobko†
Steven J. Wood**
Kenneth A. Norman
Kathryn C. Bass
Nicola J. Boone Melby***
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*Board Certified
Real Estate Lawyer

**Board Certified Wills,
Trusts & Estates Lawyer

***Board Certified
Elder Law Lawyer

†Supreme Court
Certified Circuit
Family Mediator

††Supreme Court
Certified Circuit
Civil Mediator

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kitterman, 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:

Robert P. Summers

(Contact Person)

McCarthy, Summers, et. al.

(Firm/Company)

2400 SE Federal Hwy, 4th Floor

(Address)

Stuart, Florida 34994

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert P. Summers

(Name of Contact Person)

at (772) 286-1700

(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



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: Kitterman, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L05000033048

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/21/2015

4. I, Michael Matakaetis, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager and 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)

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