

W6000021823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

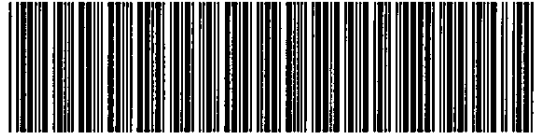
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W6-21823  
JR

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Crossings At Kentucky, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Kirby  
(Name of Person)

The Crossings At Kentucky, LLC  
(Firm/Company)

P.O. Box 770669  
(Address)

Winter Garden, FL 34797  
(City/State and Zip Code)

For further information concerning this matter, please call:

Erica Walker at 407 427-0398  
(Name of Person) (Area Code & Daytime Telephone Number)

**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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER**

I, John Kirby, hereby resign as Managing Member  
(Title)  
of The Crossing At Kentucky, LLC  
(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida  
and affirm that the limited liability company has been notified in writing of the resignation.

John Kirby

(Signature of resigning manager, managing member or member)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**FILING FEE IS \$25.00**

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314