107000060685

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT N	IAIL
(Business Entity Name)	
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(Document Number)	
(Basament Hamber)	
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TAIL THANKSEE EL COIDA

8 Secon NOV:18 2018

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Kaye Proper (Name of Limite	d Liability Company)
The enclosed member, managing member or managing.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
Mawage/ (Contact Person)	
Kayo Properties (Firm Company)	
P6. 372843	
Satellie Deach, Abrida (City State and Zip Code)	72935
For further information concerning this matter.	please call:
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t \$\square \text{S25 Filing Fee}\$	the Florida Department of State for: S55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Kaye Properties L.L.	
2. This limited liability company was organized under the laws of:	FILED
3. The Florida document/registration number of this limited liability company is: L07000060685	
4. I. Ron Hayden	
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.	
Signature of Resigning Member, Managing Member or Manager	
Filmo Fee: 525 00 (Requires)	

Certified Copy:

\$30.00 (Optional)