

108000062302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

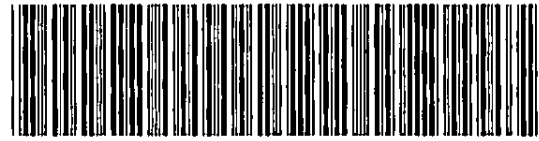
(Business Entity Name)

(Document Number)

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S. TALLENT

MAY 29 2019

FILED  
2019 MAY 13 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FL

*Amend or  
Cancel  
St. of Authority*

## Kahama VII, LLC

8501 Atlantic Avenue, Wildwood Crest, NJ 0260  
Phone: (609) 729-8562 • Fax: (609) 522-7756

April 29, 2019

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

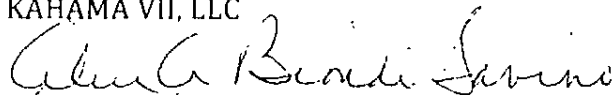
RE: Kahama VII, LL  
Cancellation of Statement of Authority

Dear Sir/Madam:

Enclosed please find original (and copy) of an executed Cancellation of Statement of Authority pertaining to the referenced matter. Also enclosed please find our check in the amount of \$30.00 for processing fee. Please process the enclosed and return a copy to me in the envelope provided.

If you have any questions, feel free to contact me.

Sincerely,  
KAHAMA VII, LLC



Alice A. Biondi-Savino, assistant to  
Michael A. DiAntonio, Sr.

/aabs  
Enclosures

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

Kahama VII, LLC

**SUBJECT:** \_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael A. DiAntonio, Sr.

\_\_\_\_\_  
Name of Person

Kahama VII LLC

\_\_\_\_\_  
Firm/Company

17 Cache Cay Drive

\_\_\_\_\_  
Address

Vero Beach, FL 32963

\_\_\_\_\_  
City/State and Zip Code

payables@pmtmanagement.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification) ✓

For further information concerning this matter, please call:

Michael A. DiAntonio, Sr.                      609                      780-3756  
\_\_\_\_\_  
Name of Person                      at (                      )                      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

**AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY**

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

**Kahama VII LLC**

**FIRST:** The name of the limited liability company is: \_\_\_\_\_

\_\_\_\_\_  
**SECOND:** The Florida Document number of the limited liability company is: L08000062302

**THIRD:** The street address of the limited liability company's principal office is:

17 Cache Cay Drive

Vero Beach, FL 32963

The mailing address of the limited liability company's principal office is:

17 Cache Cay Drive

Vero Beach, FL 32963

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2019 MAY 13 AM 10:56  
STATE  
SECRETARY  
FLORIDA

\_\_\_\_\_  
**FOURTH:** The date the statement of authority became effective is: March 29, 2019

**FIFTH:** The statement of authority is cancelled.

**OR**

The amendment to the statement of authority is

  
\_\_\_\_\_  
Signature of authorized representative

Michael A. DiAntonio, Sr.

\_\_\_\_\_  
Typed or printed name of signature

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**