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(Re	questor's Name)				
(Add	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
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SECRETARY OF STATE
TALLAHASSEE, FL

JU 01/23/20

COVER LETTER . . .

TO:	_	stration Section ion of Corporations				
SUBJE	ECT:	Keaton Pointe Properties, LLC				
		(Name of Limited Liability Company)				
The en	closec	d member, resignation or dissocia	tion and fee	(s) are submitted for filing.		
Please	return	all correspondence concerning the	his matter to	:		
Chris Tu	uten					
	_	(Contact Person)		- -		
Keaton l	Pointe	Properties, LLC				
		(Firm/Company)		 -		
4165 CF	R 210 V	Vest				
· · · · · · · · · · · · · · · · · · ·		(Address)				
Saint Jo	hns, Fl	. 32259				
		(City/State and Zip Code)		_		
For fur	ther in	nformation concerning this matter	r, please call	:		
Chris Tu	uten		904 at (813-6987		
	(N	ame of Contact Person)		e & Daytime Telephone Number)		
		ase find a check made payable to				
■ \$25	Filing	g Fee	□ \$55 Filir	ng Fee & Certified Copy		
	Regis Divis P.O.	ng Address: stration Section ion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

CR2E079 (2/14)



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)

	· limited liability company as			
	ument/registration number as			
	ember/manager withdrew/res			
4. 1. Henry D. Paramo	4. 1. Henry D. Paramore, hereby withdraw/resign as a, hereby withdraw/resign as a			
Managing Membe				
	(Print Title)			
of this limited lia	bility company and affirm th	e limited liability company	has been notified of my	
Henry David Para	more			
—		. <u>. </u>	202 SE(T)	
Signature of D	issociating Member or Resig	ning Manager	F ! L 2020 JUL 30 SECRETARY	
	\$25.00 (Required) \$30.00 (Optional)		LED O AMIO: 31 RY OF STATE IASSEE, FL	