1120000 89089

(Re	equestor's Name)	
(Ac	idress)	·
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
,	,	•
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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·	-, 	

Office Use Only



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The State of the Contract of

LLC MMM ROISMA 10/16/19 October 9, 2019

KARIN VANGURA 109 TEAL POINTE LANE PONTE VEDRA BEACH, FL 32082

SUBJECT: K&D CAPITAL, LLC Ref. Number: L12000089089

We have received your document for K&D CAPITAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the date of resignation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 819A00020801

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Division of Compactions D.O. DOV 6207 Tallaharras Elavida 2021

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: K & D Capital, LLC	
(Name of Li	imited Liability Company)
The enclosed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
Karin Vangura	
(Contact Person)	
K & D Capital, LLC	
(Firm/Company)	
109 Teal Pointe Lane	
(Address)	
Ponte Vedra Beach, FL 32082	
(City/State and Zip Code)	
For further information concerning this man	tter, please call:
Karin Vangura	904 451-4923
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

19 OCT 16 PM 2: 13

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company Capital, LLC	as it appears on the records of the Florida Departme
2. The Florida doc	ument/registration number	assigned to this limited liability company is:
L1200008908	9	
3. The date this mo	ember/manager withdrew/r	esigned or will withdraw/resign is:
4 I David Vangu	ıra	hereby withdraw/resign as a
(Print A	lame of Person Resigning)	, hereby withdraw/resign as a
Manager		
•	(Print Title)	•
of this limited lia resignation in wr		the limited liability company has been notified of m
XC on 12	Dianger issociating Member or Res	
Signature of D	issociating Member or Res	signing Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	