*//3000075782

(Req	uestor's Name)	
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EXMINER NOV 17 2014

COVER LETTER

	tration Section ion of Corporations		
SUBJECT:	TKG Ventures, LLC		
	(Name of Limit	ed Liability Con	npany)
The enclosed	member, resignation or dissocia	tion and fee(s) are submitted for filing.
Please return	all correspondence concerning the	his matter to:	
Kenworth R	eeves, Jr.		_
	(Contact Person)		
TKG Ventu	res, LLC		
	(Firm/Company)		-
3804 N. Jot	nn Young Parkway, Suite 10		
	(Address)		_
Orlando, FL	. 32804		
	(City/State and Zip Code)		-
For further in	nformation concerning this matter	r, please call:	
Kenworth R	Reeves, Jr.	407 at (242-4611
(Na	ame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy			
Registration S Division of C Clifton Build 2661 Executi	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 it appears on the records of the Florida Department Ventures, LLC
2. The Florida docu L1300007578	ment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
	hereby withdraw/resign as a man of Person Resigning)
	mber and Member
	(Print Title)
of this limited lial resignation in wri	poility company and affirm the limited liability company has been notified of my iting.
Signature of Di	ssociating Member or Resigning Manager
-	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)