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SEGKETARY OF STATE ALLAHASSEE, FLORID,

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: KINGSEAL LLC	
	Limited Liability Company)
The enclosed member, resignation or dis-	sociation and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to:
Mr. Shyamie Dixit, Esq.	
(Contact Person)	<del></del>
Dixit Law Firm	
(Firm/Company)	
3030 N Rocky Pt Dr W #260	
(Address)	<del></del>
Tampa, FL 33607	
(City/State and Zip Code)	<u>.                                      </u>
For further information concerning this n	natter, please call:
Shyamie Dixit	813 252-3999
(Name of Contact Person)	(Area Code & Daytime Telephone Numbe
Enclosed please find a check made payabase \$25 Filing Fee	ble to the Florida Department of State for:  \$\square\$ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Ruilding	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	Tallahassee, Florida 32314

Tallahassee, Florida 32301

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)

1. The name of the of State is: KING		s it appears on the records of the F	lorida Department
	ıment/registration number a	ssigned to this limited liability co.	mpany is:
LUMATE DADE	NUIODOT	signed or will withdraw/resign is: . hereby withdraw/resign as	
MEMBER an	d/or MANAGER	, hereby withdraw/resign as	
		ne limited liability company has b	een motified of my
Signature of Di	ssociating Member or Resig	ining Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		