<u>1300/44028</u>

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE

COVER LETTER .

Division of Corporations	
SUBJECT: KIRTON SER (Name of Limited Liability Co	
The enclosed member, resignation or dissociation and fee	(s) are submitted for filing.
Please return all correspondence concerning this matter to	o:
Scott Corey Kirton (Contact Person)	
Kirton Services LLC (Firm/Company)	
8731 NE 48 Th 5T (Address)	
OKeeChobee FC 34972 (City/State and Zip Code)	
For further information concerning this matter, please call	l:
Corey Kirton at (863) (Name of Contact Person) (Area Cod	de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida ■ \$25 Filing Fee ■ \$55 Filing	ng Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS TO TO THE Registration Section SSAR Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 22

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 limited liability company as it appears on the records of the Florida Department
of State is: KIRTON SERVICES LLC.
2. The Florida document/registration number assigned to this limited liability company is: L/3000/64028
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 5/26/15 4. I, Sanar tha Hickman, hereby withdraw/resign as a
(Print Name of Person Resigning) MGRM (Print Title) AGECRE AHAGE TAGER AND THE TAGER AGE TO THE TAGE TO THE TAGER AGE TO THE TAGET AGE TO THE TAGER AGE TO THE TAGET AGE TO T
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. Signature of Dissociating Member or Resigning Manager

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)