L14000142276

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Office Use Only



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COVER LETTER

TO: Registration Section **Division of Corporations** Wood and Key, LLC **SUBJECT:** (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: GARRY WOOD (Contact Person) (Firm/Company) 415 ST. JOHNS AVENUE, Suite 2 (Address) Palatka, Florida 32177 (City/State and Zip Code) For further information concerning this matter, please call: Garry Wood (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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)

The name of the limited liability company as it appears on the records of the Florida Department of State is: Wood and Key, LLC
2. The Florida document/registration number assigned to this limited liability company is: L14000142276
3. The date this member/manager withdrew/resigned or will withdraw/resign is:
4. I, KATHY KEY, as PR of the ESTATE of JOHN KEY (Print Name of Person Resigning), hereby withdraw/resign as a
(Print Name of Person Resigning)
Manager
tPrint Title)
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

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: