450000 60941

questor's Name)				
dress)	-			
dress)				
(City/State/Zip/Phone #)				
☐ WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certificates	s of Status			
Special Instructions to Filing Officer:				
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Office Use Only



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D. SCOTT DEC 1 4 2018

COVER LETTER

	Registration Section					
1	Division of Corporations					
SUBJEC	Blue Kite Insight LLC					
	(Name of	(Name of Limited Liability Company)				
The encl	losed member, resignation or diss	sociation and fee(s) are su	ubmitted for filing.			
Please re	eturn all correspondence concerni	ing this matter to:				
Christo	pher DeSantis					
-	(Contact Person)					
Blue Kit	te Insight, LLC					
	(Firm/Company)					
100 So	uth Ashley Dr. Suite1100		MIN DEC 10 P 10: 3			
	(Address)					
Tampa,	, FL 33602		0			
	(City/State and Zip Code)		ي 30 · ·			
For furth	ner information concerning this m	natter, please call:	···			
Christo	pher DeSantis	646 351	-9959			
	(Name of Contact Person)	(Area Code & Day	time Telephone Number)			
	d please find a check made payab filing Fee	ele to the Florida Departn □ \$55 Filing Fee &				
	T/COURIER ADDRESS:		LING ADDRESS:			
_	tion Section	_	tration Section ion of Corporations			
Clifton I	of Corporations Building		Box 6327			
	ecutive Center Circle		nassee, Florida 32314			

CR2E079 (2/14)

Tallahassee, Florida 32301



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 Kite Insight, LLC	it appears on the records of the Florida Departn	nent
2. The Florida doc	ument/registration number as	ssigned to this limited liability company is:	
L1500006094	1	27.	
4. I, Terri M Hewi (Print N Managing Pa	tt lame of Person Resigning) rtner	igned or will withdraw/resign is: 12/7/2018 hereby withdraw/resign as a	1)
	(Print Title)	,,	
of this limited lia resignation in wr		e limited liability company has been notified of	my
Signature of D	· Lkut. ssociating Member or Resig	ning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		