

11500078883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

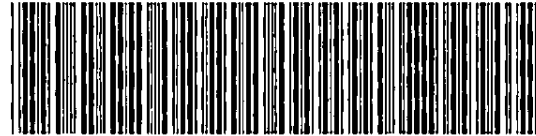
(Document Number)

Certified Copies _____ Certificates of Status _____

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12/07/18--01008--029 ++\$2.50

FILED
19 JAN -2 PM 4:00
SEC. OF STATE
TALLAHASSEE, FLORIDA

K. SALY
JAN 7 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 19, 2018

COSETTE KELLEY
2540 BILLIE LN
MALABAR, FL 32950

SUBJECT: 321 DONE PROPERTIES, LLC
Ref. Number: L15000078883

We have received your document for 321 DONE PROPERTIES, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LP/LLLP, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 618A00026008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 321 Done Properties
(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:

To Ann Turner / Cosette Kelley
(Contact Person)

321 Done Properties
(Firm/Company)

1498 Goldrush Ave
(Address)

Melbourne FL 32940
(City/State and Zip Code)

For further information concerning this matter, please call:

Cosette Kelley at (772) 532 6770
(Name 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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
19 JAN -2 PM 4:00
SUCRA
TALLAHASSEE, FLORIDA

**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: 321 Done properties

2. The Florida document/registration number assigned to this limited liability company is:

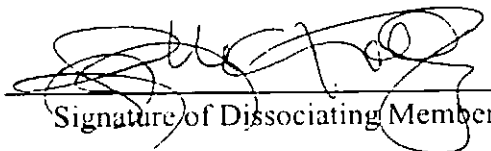
L15000078883

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/4/18

4. I, Cosette Kelley, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager
(Print 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

Filing Fee: \$25.00 (Required) — Paid
Certified Copy: \$30.00 (Optional) have credit