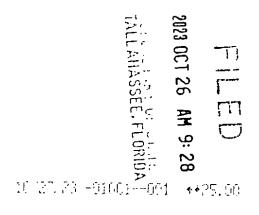
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	(Requestor's Name)	
	(Address)	
	(Audiess)	
	(Address)	
	(City/State/Zip/Phone #)	 _
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of Str	atus
Special Instructions to	Filing Officer:	
		•

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:	K&:	N PROPERTIES LLI 	<u></u>
	(Name of I	Limited Liability Cor	mpany)
The enclosed member, r	esignation or diss	ociation and fee(s	s) are submitted for filing.
Please return all corresp	ondence concerni	ng this matter to:	
STACY SMALL			
(0	Contact Person)		-
SMITH THOMPSON SHA	w		
(F	Firm/Company)		-
3520 THOMASVILLE ROA	AD - 4TH FLOOR		
	(Address)		_
TALLAHASSEE, FL 32309)		
(City/	State and Zip Code)		_
For further information	concerning this m	atter, please call:	
STACY SMAŁL		850 at (893-4105
(Name of Cont	act Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a c ■ \$25 Filing Fee	heck made payabl		Department of State for: g Fee & Certified Copy
Mailing Address: Registration Sectorial Division of Corp P.O. Box 6327 Tallahassee, FL	porations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 816

Tallahassee, FL 32303

CR2E079 (2/14)

FILED



2023 OCT 26 AM 9: 28

TALLAHASSEE, FLORIDA

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	it appears on the records of the Florida Department
2. The Florida docu	ument/registration number ass	signed to this limited liability company is:
ROBERT L. E	BEACH	gned or will withdraw/resign is:
4. I,	James of Parent Preiming)	, hereby withdraw/resign as a
MANAGER & M		
	(Print Title)	
of this limited lial resignation in wri	bility company and affirm the iting.	limited liability company has been notified of my
Signature of Di	ssociating Member or Resign	ing Manager
	\$25.00 (Required) \$30.00 (Optional)	