L15000198595

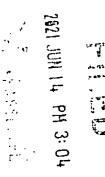
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Rusination

JUN 23 7021 ! ALBRITTON

COVER LETTER

Division of Corporations	
SUBJECT: KELLER FINANCE COM	PANY LLC
	Limited Liability Company)
The enclosed member, resignation or diss	ociation and fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to:
TERESITA F. MIYARES	
(Contact Person)	
MIYARES GROUP, LLC	
(Firm/Company)	
130 MADEIRA AVENUE	
(Address)	
CORAL GABLES, FL 33134	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
	at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payabl \$\square\$ \$25 Filing Fee	e to the Florida Department of State for: \$\square\$ \$\square\$ \$\\$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, Fl. 32314



2021 JUN 14 PM 2:56

May 27, 2021

TERESITA F. MIYARES 130 MADEIRA AVENUE CORAL GABLES, FL 33134

SUBJECT: KELLER FINANCE COMPANY LLC

Ref. Number: L15000198595

We have received your document for KELLER FINANCE COMPANY LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the date of resignation

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) 245-6050.

Letter Number: 721A00011597

Irene Albritton Regulatory Specialist II

www.sunbiz.org



DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

KEL	limited liability company as it appears on the records of the Florida Departmen LER FINANCE COMPANY LLC
2. The Florida doc L1500019859	ument/registration number assigned to this limited liability company is: 5
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: _03/31/2021 ·
4. I, RICARDO C	, hereby withdraw/resign as a
(Print l	lame of Person Resigning)
MANAGER	
	(Print Title)
of this limited lia resignation in wi	bility company and affirm the limited liability company has been notified of my iting.
X2-	
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)