## 1/6000/0124

(Re	questor's Name)						
(Ad	dress)						
(Ad	idress)						
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	_ Certificates	of Status					
Special Instructions to	Filing Officer:						

Office Use Only



700307192267

01/03/18--01017--018 \*\*25.00

18 JAN 17 PH 30 I

LEGGETT AN 18 2018

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT: KC Design S Mam I (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:
Francisco Aleman
KC. Designs Miami
24015W 13881
Miamia Fl 33 (75 (City/State and Zip Code)
For further information concerning this matter, please call:
Alexis Aleman at (305) 879-217 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sum_\$\$ \$25 \text{ Filing Fee}\$\$ \$\sum_\$\$ \$55 \text{ Filing Fee} & \text{ Certified Copy}\$\$
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, 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)

		ļ				
	limited liability compa			Florida 1 L_ L_	Depar	tment
	ment/registration num	r	limited liability co	mpany	is:	
3. The date this mer	mber/manager withdre	ew/resigned or will w	/ithdraw/resign is:	12-	2/	· †
M (-)	ALEM Quane of Person Resigning) Print Title)		vithdraw/resign as	a		
of this limited liab resignation in wri	oility company and aff ting.	īrm the limited liabil	lity company has b	een not	ified (	of my
Signature of Dis	<u>Ulemon</u> ssociating Member or	Resigning Manager	-		18 JAN 17	71
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			AGINO PE PLIATE	P# 3:  (	D