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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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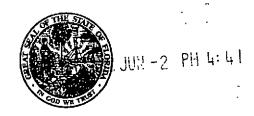
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C CT...V.ONS

COVER LETTER

TO:	_	stration Section				
	Divis	sion of Corporations				
SUBJ	IECT: Kids Town Enterprises LLC (Name of Limited Liability Company)					
The en	nclosed	l member, resignation or disso	ciatio	on and fee((s) are submitted for filing.	
Please	ereturn	all correspondence concerning	g this	s matter to	:	
James !	B. Lyon	, Esq.				
		(Contact Person)				
James !	B. Lyon	, P.A.				
		(Firm/Company)			_	
7900 G	Blades R	oad, Suite 435				
		(Address)			_	
Boca R	Raton, Fl	orida 33434				
		(City/State and Zip Code)			_	
For fu	rther in	nformation concerning this ma	itter, [please call	:	
Jim Ly	on		at	561 (451-3400	
	(N	ame of Contact Person)	<u> </u>	,	e & Daytime Telephone Number)	
Englos	sed ple	ase find a check made payable	e to th	ne Florida	Department of State for:	
	5 Filing				g Fee & Certified Copy	
	Mailir	ng Address:			Street Address:	
	Regis	stration Section			Registration Section	
		ion of Corporations			Division of Corporations	
		Box 6327 hassee, FL 32314			The Centre of Tallahassee	
	i aiia	Hassee, FL 32314			2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	



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)

	Town Enterprises, LLC
2. The Florida doc	eument/registration number assigned to this limited liability company is:
3. The date this m	ember/manager withdrew/resigned or will withdraw/resign is: May 5, 2020
4. I, Equipeare Corp.	
Manager	
	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)