

L16 000120 544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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STATE OF NEW YORK
JULIA A. SMITH, CLERK

Resignation

MAR 20 2020

J. ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: URBAN RENAISSANCE, LLC

(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:

Kelvin G. Arnold

(Contact Person)

Faithful Builders LLC

(Firm/Company)

2860 NW 184 ST

(Address)

Miami Gardens, Florida 33056

(City/State and Zip Code)

For further information concerning this matter, please call:

Kelvin G. Arnold

at (786) 718-4303

(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

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E079 (2/14)

2020 FEB -4 PM 2:44

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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2020 FEB 28 AM 9:47
NOTARIAL PUBLIC

**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: URBAN RENAISSANCE, LLC
2. The Florida document/registration number assigned to this limited liability company is: L16000120544
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12-17-20
4. I, Kelvin G. Arnold, hereby withdraw/resign as a
(Print Name of Person Resigning)
Authorized Member
(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)
Certified Copy: \$30.00 (Optional)



Michael Baccus
State of Florida
My Commission Expires 10/14/2022
Commission No. GG 266898