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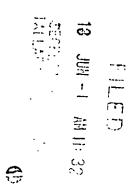
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## **COVER LETTER**

Division of Corporations
SUBJECT: King Landscaping L.L.C. (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:
MARK V. Jones (Contact Person)
Kings Landscaping L'L'C,
265 Buttonwood DR-
KEY BISCAUNE FL 33149 (City/State and Zip Code)
For further information concerning this matter, please call:
at ()  (Name of Contact Person) at ()  (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee \$\sum \\$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations  MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle Tallahassee, Florida 32301

TO: Registration Section



## 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)



1. The name of the limited liability company as it appears on the records of the Florida Departme	ent
of State is: Kings Landscaping L.L.C.	<u>-</u> .
2. The Florida document/registration number assigned to this limited liability company is:	
L 16000214842	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: $\frac{5/29/16}{1}$	_
4. I. Mark V. Jones , hereby withdraw/resign as a (Print Name of Person Resigning)	
Manager (Print Title)	
of this limited liability company and affirm the limited liability company has been notified of n resignation in writing.	ny
Mw Grot	
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required)	
Certified Copy: \$30.00 (Optional)	