1600232359

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Registration Section

Division of Corporations

TO:

SUBJECT: GK REMOVIATIONS AND CONSUTTING 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:
GREGORY A. LETGH (Contact Person)
(Firm/Company)
COY PINE St. (Address)
OCOFF, FLORIDA 34761 (City/State and Zip Code)
For further information concerning this matter, please call:
GREGORIA LETEST at (407) 467-3474 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sim\$ \$\\$25\$ Filing Fee & Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, Florida 32314

CR2E079 (2/14)

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

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)

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: GK RENOVATIONS AND CONSULTING U.C.
2. The Florida document/registration number assigned to this limited liability company is:
L16000232359
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12 (6) 2 3 1
4.1. GREGORG A. LEIGH , 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 my resignation in writing.
) i
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)