## L170000/8025

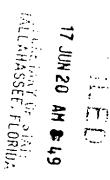
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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## **COVER LETTER**

TO: Registration Section

CR2E079 (2/14)

Divis	tion of Corporations		
SUBJECT:	3 ACES KING KRATOM	LLC	
	ompany)		
The enclosed	f member, resignation or diss	sociation and fee(	s) are submitted for filing.
Please return	all correspondence concerni	ing this matter to:	
Richard A	Cicero III		
	(Contact Person)		_
3 ACES KI	NG KRATOM LLC		
	(Firm/Company)		_
9500 118T	H LANE		
	(Address)		_
SEMINOLE	E, FL 33772		
<del>- ,</del>	(City/State and Zip Code)		<del></del>
For further in	nformation concerning this n	natter, please call	:
Richard A	Cicero III	941 at (	580-0806
(N	lame of Contact Person)	(Area Cod	e & Daytime Telephone Number)
Enclosed ple \$25 Filing	ease find a check made payab g Fee - t		Department of State for:  Ig Fee & Certified Copy
	OURIER ADDRESS:		MAILING ADDRESS:
Registration Division of C	Section Corporations		Registration Section Division of Corporations
Clifton Build	ding		P.O. Box 6327
	ive Center Circle Florida 32301		Tallahassee, Florida 32314



## 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)

	limited liability company as	s it appears on the records of t	he Florida Department	
L1700001802	25	ssigned to this limited liability	<u> </u>	
3. The date this me	ember/manager withdrew/res NAK	signed or will withdraw/resign	03/10/20 € SSEC	
(Print N	ame of Person Resigning)		AH # 19	
		ne limited liability company h	<b>F</b> *	
Signature of D	Strate () issociating Member or Resig	gning Manager		
=	\$25.00 (Required) \$30.00 (Optional)			