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COVER LETTER

TO:

CR2E079 (2/14)

Registration Section

Division of Corporations Callaway Key, LLC a Florida limited liability company SUBJECT: (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: Denise Hallmon Rowan, Esq. (Contact Person) Denise Hallmon Rowan and Associates, P.A. (Firm/Company) 1022 W. 23rd Street Suite 600 (Address) Panama City, FL 32405 (City/State and Zip Code) For further information concerning this matter, please call: Nicholas J. Youtz, Esq. 850 215-4155 (Name of Contact Person) (Area Code & Davtime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 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)

	e limited liability company as it a away Key LLC		Florida Department
2. The Florida doc	nument/registration number assign	ned to this limited liability co	ompany is:
3. The date this me	ember/manager withdrew/resigne	 ed or will withdraw/resign is	8/23/18
4. I, Felix Family	Holdings, LLC c/o Lisa Felix	haraby with draw/assisses	
(Print l	Name of Person Resigning)	_, nereby withdraw/resign as	s a
Member			
-	(Print Title)		
of this limited lia resignation in wr	bility company and affirm the limiting.	nited liability company has t	oeen notified of my
Signature of D	issociating Member or Resigning	, Manager	201 SEC TA
	\$25.00 (Required) \$30.00 (Optional)		ZOIO AUG 27 PH SECRETARY OF STALLAHASSEE