L17000169376

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to 1 ming Officer.				

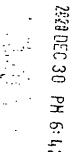
Office Use Only

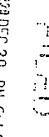


300356827873

12/30/20--01014--007 **25.00

FEB 10 2021 **S. YOUN**G





COVER LETTER

,	gistration Section		
Div	vision of Corporations		
SUBJECT	De Kaey Management LLC		
		f Limited Liability C	Company)
The enclos	sed member, resignation or dis	ssociation and fee	e(s) are submitted for filing.
Please retu	irn all correspondence concert	ning this matter to	o;
Glenn De Ka	асу		
	(Contact Person)		
De Kaey Ma	magement LLC		
	(Firm/Company)		_
11358 SW 2	43 TER		
	(Address)	· · · · · ·	_ _
Homestead,	Florida 33032		
	(City/State and Zip Code)		_
For further	information concerning this	matter, please cal	1:
Glenn De Ko	ney	786 at (8734747
((Name of Contact Person)		de & Daytime Telephone Number)
Enclosed p	olease find a check made paya ing Fee		Department of State for: ng Fee & Certified Copy
Reg Div P.C	iling Address: gistration Section vision of Corporations D. Box 6327 Hahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
			Tallahassee FL 32303



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	appears on the records of the Florida Department
2. The Florida doc L17000169376	cument/registration number assig	gned to this limited liability company is:
Dlanon Course		ned or will withdraw/resign is: <u>12/29/</u> 20 20
Manager / Memb		
of this limited lia resignation in w		imited liability company has been notified of my
Signature of D	dissociating Member or Resignin	MARYSELVA DIAZ MY COMMISSION # GG 343419 EXPIRES: October 10, 2023 Bonded Thru Notary Public Underwriters
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	