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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section

CR2E079 (2/14)

Division of Corporations					
SUBJECT: Casey Key Lender LLC					
(Name of Limited Liability Company)					
The enclosed member, resignation or diss	ociation and fee(s) are submitted for filing.			
Please return all correspondence concerni	ng this matter to:				
Vincent Payne					
(Contact Person)	-	_			
Casey Key Lender LLC					
(Firm Company)		_			
201 South Palm Avenue, #817					
(Address)		_			
Sarasota, FL 34236					
(City/State and Zip Code)		_			
For further information concerning this m	atter, please call:				
Vincent Payne	941 at (894-8175			
(Name of Contact Person)		e & Daytime Telephone Number)			
Enclosed please find a check made payab ☐ \$25 Filing Fee		Department of State for: g Fee & Certified Copy			
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section			
Division of Corporations		Division of Corporations			
Clifton Building		P.O. Box 6327			
2661 Executive Center Circle Tallahassee, 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)

	he limited liability company as asey Key Lender LLC	s it appears on the records of the Flor	rida Department	
2. The Florida do	•	ssigned to this limited liability comp	oany is:	
0 1/		signed or will withdraw/resign is: Au	ıgust 5, 2017 ——	
Manager of this Junited I resignation in v	(Print Title) liability company and affirm th	ne limited liability company has beer	17 SEP - 1 TH 4: 08 SECTO LARY OF STATE TALLEMASSEE, FLORIDA	FILED
Filing Fee:	\$25.00 (Required)			

Certified Copy:

\$30.00 (Optional)