

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DAVIS, SCHNITKER, REEVES & BROWNING, P.A.
Account Number : I19980000057
Phone : (850)973-4186
Fax Number : (850)973-8564

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
T & K PROPERTIES OF LIVE OAK, LLC**

Certificate of Status	0
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Estimated Charge	\$25.00

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Corporate Filing Menu

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COVER LETTER

((H19000008688 3))

TO: Registration Section
Division of Corporations

SUBJECT: T & K PROPERTIES OF LIVE OAK, 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:

KEITH ALAN GORDON
(Contact Person)

T & K PROPERTIES OF LIVE OAK, LLC
(Firm/Company)

721 SOUTH RANGE STREET
(Address)

MADISON, FLORIDA 32340
(City/State and Zip Code)

For further information concerning this matter, please call:

KEITH ALAN GORDON at ()
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
☒ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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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: T & K PROPERTIES OF LIVE OAK, LLC

2. The Florida document/registration number assigned to this limited liability company is: L18000221601

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Jan 8, 2019

4. I, KEITH ALAN GORDON, hereby withdraw/resign as a
(Print Name of Person Resigning)

MEMBER

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

A handwritten signature in black ink, appearing to read "K. Gordon", is written over a horizontal line.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

(((H19000008688 3)))



January 9, 2019

FLORIDA DEPARTMENT OF STATE

Division of Corporations

T & K PROPERTIES OF LIVE OAK, LLC
PO BOX 507
MADISON, FL 32341

SUBJECT: T & K PROPERTIES OF LIVE OAK, LLC
REF: L18000221601

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Each resignation needs its own fax audit sheet.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Agnes Lunt
Regulatory Specialist III

FAX Aud. #: H19000008688
Letter Number: 219A00000595

2019 JAN 10 10:25 AM



January 9, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

T & K PROPERTIES OF LIVE OAK, LLC
PO BOX 507
MADISON, FL 32341

SUBJECT: T & K PROPERTIES OF LIVE OAK, LLC
REF: L190J0221601

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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If you have any questions concerning the filing of your document, please call (850) 245-6939.

Agnes Lunt
Regulatory Specialist III

FAX Aud. #: E19000C08688
Letter Number: 219A00000595

2019 JAN 10 10:25 AM