## L19000069450

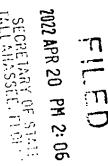
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
}
1
J. HORNE
JUN 1 1 2022

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## **COVER LETTER**

TO: Registration Section	
Division of Corporations	
KAVANANDA LLC SUBJECT:	
(Name of Limited	Liability Company)
The enclosed member, resignation or dissociation	on and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to:
ROSS KASHTAN	
(Contact Person)	
KAVANANDA LLC	
(Firm/Company)	<del></del>
2500 5TH AVE N	
(Address)	<del></del>
ST. PETERSBURG, FL 33713	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
ROSS KASHTAN	727 409-6547
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th ■ \$25 Filing Fee	he Florida Department of State for:  3 \$55 Filing Fee & Certified Copy
	- ','
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassec 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)

1. The name of the	limited liability company as it appears on the records of the Florida Department
of State is: KAV	ANANDA LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
L19000069450	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
IOUN CIDEL	, hereby withdraw/resign as a   'ame of Person Resigning)
(Print N	'ame of Person Resigning)
MANAGER	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
	alles Tels &
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	S25.00 (Required)
	\$30.00 (Optional)