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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Kayo Man Music (Name of Limited Liability Con	LLC ipany)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:	-
Kyle Washington (Contact Person)	-
Kayo Man Music LLC (Firm/Company)	-
13201 Memorial Hwy, #2	18
North Miami, FL 33161 (City/State and Zip Code)	-
For further information concerning this matter, please call:	
Kyle W45hmg+an at (786e) (Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida D \$\text{\$\subset\$\\$\\$\\$\\$\\$\\$\\$\\$}\\$ Filing	Pepartment of State for: Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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 li					e Florida Dep	artmer	าเ
of State is:	Kayo	Man	Music	LLC			
2. The Florida docum	nent/registra	tion number	assigned to thi	s limited liability	company is:		
L1900	00775	515	·				
3. The date this mem	ıber/manageı	withdrew/i	resigned or will	withdraw/resign	is: 7/20	120	20
4. I, MILS (Print Nat	ne of Person R	MCS 1 esigning)	ASTON, hereby	withdraw/resign	as a		
Manae	on Title)						
of this limited liabi resignation in writi		y and affirm	the limited liab	oility company ha	s been notified		у
Mils M	Ja - W	\ _p			TALLI TALLI	2020 JUL 31	1
Signature of Diss	sociating Me	mber or Re	signing Manage	er	ARY	သ	
Filing Fee: Certified Copy:		-			SSEE, F	PH I:	ED
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