L19 000 113940

(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:

Office Use Only



500377459525

12/08/21--01007--007 **25.00



C. BRUMBLEY
DEC 222021

COVER LETTER

	istration Section ision of Corporations			
SUBJECT:	Tiny House Kenwood, LLC			
SOULCI.	(Name of	ompany)		
The enclose	ed member, resignation or diss	sociatio	n and fee	(s) are submitted for filing.
Please retur	n all correspondence concern	ing this	matter to	×
Elizabeth G. V	Whitecage			
	(Contact Person)			- -
Tiny House K	lenwood, LLC			
	(Firm/Company)			- -
1137 41st Ave	enue NE			
	(Address)			
St. Petersburg	, FL 33703			
	(City/State and Zip Code)			
For further i	information concerning this n	atter, p	lease call	:
Elizabeth G.	Whitecage	ai	727 (642-1340
()	Name of Contact Person)		(Area Cod	le & Daytime Telephone Number)
Enclosed pla	ease find a check made payab	ele to th	e Florida	Department of State for:
■ \$25 Filin				ng Fee & Certified Copy
Maili	ing Address:			Street Address:
Regi	istration Section			Registration Section
	sion of Corporations			Division of Corporations The Centre of Tallahassee
	Box 6327 ghassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
ı allı	анавес, г.с. 32314			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)

2. The Florida document/registration number assigned to this limited liability company is: L19000113940 3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4. 1. Daniel Whitecage	of State is:	House Kenwood, LLC	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4. 1. Daniel Whitecage (Print Name of Person Resigning) AP and from any and all other offices I hold (Print Title) of this limited liability company and affirm the limited liability company has been notified or resignation in writing.	2. The Florida doc	cument/registration number as	ssigned to this limited liability company is:
4. 1. Daniel Whitecage (Print Name of Person Resigning) AP and from any and all other offices I hold (Print Title) of this limited liability company and affirm the limited liability company has been notified or resignation in writing.	L19000113940		
4. 1. Daniel Whitecage (Print Name of Person Resigning) AP and from any and all other offices I hold (Print Title) of this limited liability company and affirm the limited liability company has been notified or resignation in writing.	3. The date this m	ember/manager withdrew/res	igned or will withdraw/resign is:
AP and from any and all other offices I hold (Print Title) of this limited liability company and affirm the limited liability company has been notified or resignation in writing.	Donial Whiteen	474	
of this limited liability company and affirm the limited liability company has been notified or resignation in writing.	(Print .	Name of Person Resigning)	
of this limited liability company and affirm the limited liability company has been notified or resignation in writing.	AP and from any	and all other offices I hold	
resignation in writing.		(Print Title)	
Signature of Dissociating Member or Resigning Manager			e limited liability company has been notified of my
Signature of Dissociating Member or Resigning Manager			
	resignation in w	Water	
\sim	resignation in w	Water	ning Manager Ell D
Filing Fee: S25.00 (Required)	resignation in w	Water	ning Manager
Certified Copy: \$30.00 (Optional)	resignation in w Signature of D Filing Fee:	Dissociating Member or Resignment S25.00 (Required)	ning Manager 7021 DEC -8