

119 000 188783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cerakote Nation, 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:

Steven Imparato, Esq.

(Contact Person)

Kenner + Imparato, PLLC

(Firm/Company)

990 Biscayne Blvd., Office #1402

(Address)

Miami, FL 33132

(City/State and Zip Code)

For further information concerning this matter, please call:

Steven Imparato

at ( 561 ) 910-7562

(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

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



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)

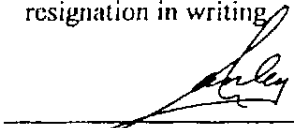
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Cerakote Nation, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
LI9000188783

3. The date this member/manager withdrew/resigned or will withdraw/resign is: December 7, 2020

4. I, Michael Manley, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Managing Member  
(Print Title)

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

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

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

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RECEIVED  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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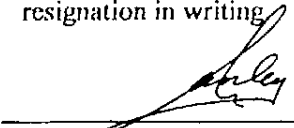
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Cerakote Nation, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L19000188783

3. The date this member/manager withdrew/resigned or will withdraw/resign is: December 7, 2020

4. I, Michael Manley, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Managing Member  
(Print Title)

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

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

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

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2020 DEC 11 PM 6:48  
TALLAHASSEE, FLORIDA