

L200000 30387

(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



400341178914

03/11/20--01009--015 \*\*25.00

FILED  
2020 MAR 11 PM 3:23  
SARAH L. JONES  
TALLAHASSEE, FLORIDA

Resignation

MAR 26 2020  
I ALBRITTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Reign K9 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:

Keri Sherriffe

---

(Contact Person)

Reign K9 LLC

---

(Firm/Company)

228 SW Hidden Court  
\_\_\_\_\_  
(Address)

Fort White, Florida 32038

---

(City/State and Zip Code)

For further information concerning this matter, please call:

Keri Sherriffe 352 727-2424  
 \_\_\_\_\_ 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

**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

FILED  
2020 MAR 11 PM 3:23  
SEATTLE, WA  
WALL STREET JOURNAL

**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: Reign K9 LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L20000030387

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 02/01/20

4. I, Richard Sherriffe, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Member(MBR) and Manager(MGR)  
*(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)