LZ0000096165

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TO:	~	stration Section		
	DIVIS	sion of Corporations		
SUBJ	IECT:	N&K Creationz LLC		
		(Name of	Limited Liability Co	ompany)
The e	nclosed	d member, resignation or dis	sociation and fee	(s) are submitted for filing.
Please	e return	all correspondence concern	ing this matter to	:
Keila I	Rosado			
		(Contact Person)		_
N&K	Creation	z LLC		
		(Firm/Company)		
3240 S	SW 34th	Street Apt. 318		
-		(Address)		<u> </u>
Ocala,	FL 3447	74		
		(City/State and Zip Code)		<u> </u>
For fu	irther ii	nformation concerning this n	natter, please call	:
Keila I	Rosado		337 at (378-2314
	(N	ame of Contact Person)		e & Daytime Telephone Number)
	sed ple 5 Filing	ase find a check made payab g Fee		Department of State for: ag Fee & Certified Copy
		ng Address:		Street Address:
		stration Section ion of Corporations		Registration Section Division of Corporations
	P.O.	Box 6327		The Centre of Tallahassee
	Talla	hassee, FL 32314		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)

	limited liability company as it appears on the records of the Florida Department
2. The Florida docu L20000096165	ment/registration number assigned to this limited liability company is:
3. The date this mer	mber/manager withdrew/resigned or will withdraw/resign is:
Noffali Rosado Re	•
MGR	
(Print Title)
resignation in wri	
Signature of Dis	Bernder sociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)