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PICK-UP	WAIT	MAIL		
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Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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COVER LETTER

TO: Registration Section	
Division of Corporations	
	!
SUBJECT: D & K Properties of Bay County LLC	
(Name of Limited Liability Co	ompany)
The enclosed member, resignation or dissociation and fee	(s) are submitted for filing.
Please return all correspondence concerning this matter to	:
Dan Gill	
(Contact Person)	+
(Firm/Company)	-
7727 McElvey Road	
(Address)	
Panama City Beach, FL 32408	
(City/State and Zip Code)	
For further information concerning this matter, please call	:
Dan Gill 850	258-6603
	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida E	
■ \$25 Filing Fee □ \$55 Filin	g Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	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	limited liability company a	s it appears on the records	of the Florida Department
of State is: D & K	Properties of Bay County LLC		
	ment/registration number	ssigned to this limited liab	oility company is:
L20000234523			
3. The date this mer	nber/manager withdrew/re	signed or will withdraw/res	sign is: December 7, 2020
4 - 4 - 4		, hereby withdraw/re	
Manager			·
(Print Title)		
of this limited liab resignation in writ		he limited liability compan	y has been notified of my
Kinnel	Millin		
Signature of Dis	sociating Member or Resi	gning Manager	
			27:13
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		2770 DEC 11
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