## L20 000 254 365

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(C)	JChata (Zia /Dhaac	
(Cit	y/State/Zip/Phone	≘#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
<u></u>	cument Number)	
(00	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

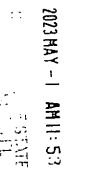
Office Use Only



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·6/30/23 VIN



## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Kustom Homes LLC	
	ed Liability Company)
The enclosed member, resignation or dissocia	tion and fee(s) are submitted for filing.
Please return all correspondence concerning the	his matter to:
Kenneth Siggs	
(Contact Person)	<del></del>
Siggs Holdings LLC	
(Firm/Company)	
14533 Eagle Ridge Dr	
(Address)	<del></del>
Fort Myers, FL 33966	
(City/State and Zip Code)	
For further information concerning this matter	r, please call:
Kenneth Siggs	239 851-2078 at ( )
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to ☐ \$25 Filing Fee	the Florida Department of State for:  \$\Bigsirem\$ \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, 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 a	is it appears on the records of	the Florida Departm	ent 
2. The Florida doc	ument/registration number a	assigned to this limited liabilit	y company is:	
Manuach Ciana C	on Cinan Hallin and L.C.	signed or will withdraw/resign		_
AMBR  of this limited lia	<i>(Print Title)</i> bility company and affirm t	he limited liability company h		ny
resignation in wr	itspeciating Member or Resi	gning Manager	2023 MAY - I	<u> </u>
	\$25.00 (Required) \$30.00 (Optional)		-I AMII: SE	CHD