121000072367

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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2021

CHRIS THOMAS 9850 -10 SAN JOSE BLVD JCKSONVILLE, FL 32257

SUBJECT: K & C DANCE L.L.C. Ref. Number: L21000072367

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 121A00026832

Querida R Silas Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: K V C D	AME LLC. Liability Company)
The enclosed member, resignation or dissociation	on and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to:
CHRIS THOMA.	5
MONANCH BAURON (Firm/Company)	oM
(Firm/Company)	
9850- 10 SAN JOSE 1	BLYO.
JASKSONVILLE FLOUDY (City/State and Zip Code)	3225/
For further information concerning this matter,	please call:
CHES TROMAS	(Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t ☐ \$25 Filing Fee	he Florida Department of State for: □ \$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



2021 DEC -3 AMII: 03 SECRETARY OF STATE TALL DEPT.

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 liab	bility company as it a	ppears on the re	cords of the Florida	Department
of State is:	+ C. DAN	CE 4.	LC.	
2. The Florida document/regis	stration number assig	ned to this limite	ed liability company	is:
1210000		<u>_</u> .		
3. The date this member/mana	iger withdrew/resign	ed or will withdr	aw/resign is: Tu	NE /3/2
4. I. KRISTA R. (Print Name of Perso	THOMAS	_, hereby withd	raw/resign as a	
	YER IN ICTR			
of this limited liability compresignation in writing.	pany and affirm the li	mited liability co	ompany has been no	otified of my
Signature of Dissociating	Member or Resignin	g Manager	_	
- · · · · · · · · · · · · · · · · · · ·	(Required) (Optional)			