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COVER LETTER

TO: Regi	istration Section		
Divi	sion of Corporations		
SUBJECT:	KMK Management and Consult	ing, LLC	
		f Limited Liability Co	mpany)
The enclose	d member, resignation or dis	ssociation and fee(s) are submitted for filing.
Please return	n all correspondence concern	ning this matter to:	
Kenneth B. Ka	aye, Jr.		
	(Contact Person)		_
	(Firm/Company)		_
6822 22nd Av	e. N., #307		
	(Address)		
St. Petersburg.	, FL 33710		
	(City/State and Zip Code)		_
For further i	nformation concerning this i	natter, please call:	
Kristine Kaye		727 at (5450834
()	lame of Contact Person)	\	& Daytime Telephone Number)
	ease find a check made paya	ble to the Florida I	Department of State for:
■ \$25 Filin	g Fee	□ \$55 Filing	g Fee & Certified Copy
	ng Address:		Street Address:
Registration Section			Registration Section
	sion of Corporations Box 6327		Division of Corporations
	B0X 0327 hassee: FL 32314		The Centre of Tallahassee

Tallahassee, FL 32303



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SECRETARY OF STATE TALLAHASSEE, FLORE

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)

153.47	e limited liability company as it appears on the records of the Florida Department
of State is: KMK	Management and Consulting, LLC
	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
4. I, Kenneth B. Kaye	, hereby withdraw/resign as a warm of Person Resigning)
Manager	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
- Then	Thank
Signature of D	ssociating Member or Resigning Manager
	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)