## L23000230010

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Divinosa Catity Marca)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. HORNE SEP - 6 2024				

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## **COVER LETTER**

TO:	Registration Section Division of Corporations			
	1511131011 01 Corporations			
SUBJ	ECT: KT TAX AND ACCOUNTING, LLC (Name of Limited Liability Company)			
2020				
The e	nclosed member, resignation or dissoc	iation and fee(	s) are submitted for filing.	
Please	e return all correspondence concerning	; this matter to:	:	
Kevin	Gaines			
	(Contact Person)		_	
Kevin	Gaines CPA			
	(Firm/Company)		_	
225 S S	Swoope Ave STE 105			
	(Address)		_	
Maitla	nd, FL 32751			
	(City/State and Zip Code)	<del>.</del>	<del></del>	
For fu	orther information concerning this mat	ter, please call:	:	
Kevin	Gaines	407 at (	613-2554	
	(Name of Contact Person)	(Area Code	e & Daytime Telephone Number)	
Enclo	sed please find a check made payable	to the Florida!	Department of State for:	
<b>)</b> \$2:	5 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	





## 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)

	e limited liability company as it appears on the records of the Florida Departmen AX AND ACCOUNTING, LLC
2. The Florida doc L21000230670	ument/registration number assigned to this limited liability company is:
Vania Caisa	, hereby withdraw/resign as a, hereby withdraw/resign as a,
(Print 1	Name of Person Resigning) (Print Title)
of this limited lia resignation in w	ibility company and affirm the limited liability company has been notified of my riting.
Signature of D	issociating Member or Resigning Manager
	\$25.00 (Required) \$30.00 (Optional)