121 000 247 216

(Damus et al.	- Name a			
(Requestor	s Name)			
(Address)				
(Address)				
(City/State/	Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Dusings)	- Mile - Marea			
(Business i	Entity Name)			
(Document Number)				
Certified Copies C	ertificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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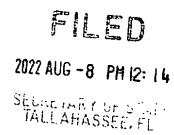
2022 AUG -8 PM IZ: 13 Seurchany de 3 ann Tallahassee, ei

COVER LETTER

TO:	Regis	stration Section				
	Divis	ion of Corporations	•			
SUBJI	ECT:	King Miles Properties, LLC				
		(Name of Limited Liability Company)				
The en	iclosec	I member, resignation or dis	sociation an	id fee(s	s) are submitted for filing.	
Please	return	all correspondence concern	ing this mat	tter to:		
Jeremy	J King					
		(Contact Person)			_	
King M	tile Prop	perties, LLC				
		(Firm/Company)		·	_	
3202 Sv	wordfis	h				
		(Address)			_	
Panama	a City B	each, FL 32408				
		(City/State and Zip Code)			_	
For fur	rther in	nformation concerning this r	natter, pleas	se call:		
Jeremy	J King		850)	774-1843	
	(N	ame of Contact Person)	(Arc	a Code	& Daytime Telephone Number)	
Enclos	ed ple	ase find a check made payat	ole to the Fl	orida E	Department of State for:	
	•	ş Fee			•	
	Mailin	og Address:			Street Address:	
	_	tration Section			Registration Section	
		ion of Corporations			Division of Corporations	
		Box 6327			The Centre of Tallahassee	
	i ana	hassee, 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 a	as it appears on the records of the Florida Department
2. The Florida doc L21000247216	ument/registration number	assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/re	esigned or will withdraw/resign is: 7-25-2022
4. I	×	hereby withdraw/resign as a
MGR	,	
	(Print Title)	
of this limited lia resignation in wr	• • •	the limited liability company has been notified of my
Signature of D	issociating Member or Resi	gning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	