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(Requestor's Name)	
(Address) (Address)	300386876013
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Special Instructions to Filing Officer:	بې آ

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COVER LETTER

TO: Registration Section Division of Corporations

K&K HANDYMAN SERVICES (Name of Limited Liability Company) SUBJECT: LLC

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Karampoulis Aristeidis

(Firm/Company)

1012 Idlebriar Way

Tarpon Springs Florida 34689 Dity/State and Zip Code)

For further information concerning this matter, please call:

Leventakis Konstantina at (717) 650-9648 (Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: □ \$25 Filing Fee X \$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

CR2E079 (2/14)



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 liability company as it appears on the records of the Florida Department

of State is: KOK HANDYNAN SERVICES LLC

2. The Florida document/registration number assigned to this limited liability company is:

L 22000018028

3. The date this member/manager withdrew/resigned or will withdraw/resign is: March 31 st 2022

4.1. <u>Karampoulis Aristeidis</u>, hereby withdraw/resign as a (Print Name of Person Resigning)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

 Signature of Dissociating Member or Resigning Manager
 1

 Filing Fee:
 \$25.00 (Required)

 Certified Copy:
 \$30.00 (Optional)