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## COVER LETTER . .

TO: Registration Section Division of Corporation			
SUBJECT: <u>Kito</u> F	OOIS LLC (Name of Limited Liability Company)		
The enclosed member, res	signation or dissociation and fee(s) are submitted for filing.		
Please return all correspor	ndence concerning this matter to:		
NICK KITU	niact Person)		
Kito POOIS	n/Company)	2	
4665 Evans	, in the second	22 OCT 11 AM	THY SECTION SOLVER
West Palm B	each FL 33414 ate and Zip Code)	97 iS HV	ai Challa b
For further information co	oncerning this matter, please call:		
NICK KITO (Name of Contac	at ( <u>U31</u> ) <u>LoU3</u> <u>4475</u> et Person) (Area Code & Daytime Telephone Number)		
Englosed please find a che \$25 Filing Fee	eck made payable to the Florida Department of State for:		
Mailing Address: Registration Section Division of Corporate P.O. Box 6327 Tallahassee, FL 32	rations Division of Corporations The Centre of Tallahassee	ı	

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 De	partment
of State is: <u>KITO</u>	POOIS LLC	·
2. The Florida document/	egistration number assigned to this limited liability company is:	
L22000431	100	
3. The date this member/r	nanager withdrew/resigned or will withdraw/resign is: 10 10	12022
4. I. BYCH DUCK (Print Name of I	hereby withdraw/resign as a erson Resigning)	
ACTIVE DEP	resentative (AP)	
resignation in writing.	ompany and affirm the limited liability company has been notification of the limited liability company has been notification of the limited liability company has been notification.	
Filing Fee: \$25	i 00 (Required) 100 (Optional)	22 OCT 11 NH 5: 4