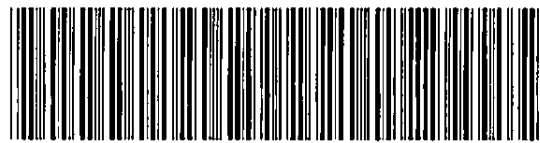


L23 000 114 292

NY



400425087764

03/04/24--01010--003 \$25.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

2024 MAR -6 PM 3:23

111111

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KATHLEEN WALSH CAFFEY, LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

KATHLEEN CAFFEY
(Contact Person)

KATHLEEN WALSH CAFFEY, LLC
(Firm/Company)

8021 Pebble Creek Lane E
(Address)

PO Box Veda Beach, FL 32082
(City/State and Zip Code)

For further information concerning this matter, please call:

KATHLEEN CAFFEY at (201) 240-4065
(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 \$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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2021 MAR -4 PM 3:23

**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: KATHLEEN WALSH CUFFEY, LLC

2. The Florida document/registration number assigned to this limited liability company is: L23000144292

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/31/23

4. I, KENNETH J CUFFEY, hereby withdraw/resign as a
(Print Name of Person Resigning)
AMBIZ
(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

PLEASE REMOVE KENNETH J CUFFEY
AS A MEMBER OF THE COMPANY