L23000319085

(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



500430460985

E0.26 24-01015-013 **210.01

FILED
2024 NAY 29 PM 12: 32

SECULAR SEE FI ORION

Michael Risco

Klik Group LLC, Klik Enterprises LLC, Klik Development LLC

19040 S. Saint Andrews Dr. Hialeah, Fl 33015

Email - MikeRisco@gmail.com

Phone - 305.409.6480

State of Florida

Registration Section, Division of Corporations

Dear Department of State,

I am writing because I have resigned from the companies listed: Klik Group LLC, Klik Enterprises LLC, Klik Development LLC and I am sending the paperwork along with the check for all of the fees.

Please let me know if there is anything else I need to do to be fully removed from the companies. Thank you so much for your help.

Warm Regards,

Michael Risco

COVER LETTER

Division of Corporations	
Klik Development LLC SUBJECT:	
(Name of Limite	d Liability Company)
The enclosed member, resignation or dissociat	ion and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to:
Michael Risco	
(Contact Person)	
(Firm/Company)	
19040 S. Saint Andrews Dr	
(Address)	
Hialeah, Florida 33015	
(City/State and Zip Code)	
For further information concerning this matter	, please call:
Michael Risco	305 409-6480 at ()
(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	S55 Filing Fee & Certified Copy
Mailing Address: Registration Section	Street Address: 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



FILED

2024 MAY 29 PM 12: 32

JECNETARY OF STATE
TALLAHASSEE. FLORIDA

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	e limited liability company as it	appears on the records of the Florida Department
of State is: Klik I	Development LLC	
	cument/registration number assi per: L23000319085	gned to this limited liability company is:
3. The date this m	ember/manager withdrew/resign	4/15/2024 ned or will withdraw/resign is:
Michael Ris	sco	, hereby withdraw/resign as a
(Print i	Name of Person Resigning)	
Member and	d Manager	
	(Print Title)	
of this limited lia resignation in w		imited liability company has been notified of my
Signature of D	Dissociating Member of-Resignia	ng Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	