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(Requestor's Name)
(Address)
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2021 APR -2 PN 5: 31

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: R+K Metal Buildings, LC (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:
Kenneth Powell
(Conact reison)
K + K Metal Buildings LLC
3920 Timber lake RdS
(Address) Lakeland FL 33810 (City/State and Zip Code)
For further information concerning this matter, please call:
Kenneth Powell at 813, 359 3136
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\Begin{align*} \text{\$\frac{1}{2}} \text{\$\frac{5}{5}} \text{ Filing Fee & Certified Copy} \end{align*}

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 DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY (Pursuant to 605.0216, Florida Statutes)

	limited liability company as it appears on the records of the Florida Department + K Metal Buildings LLC
2. The Florida docu	iment/registration number assigned to this limited liability company is:
L24000	105222
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: MArch 26, 202
4.1, USC H	Hereby withdraw/resign as a ame of Person Resigning)
MANI	AGE (Refini Title)
of this limited liab resignation in wri	pility company and affirm the limited liability company has been notified of my ting.
16	Louis
Signature of Di	ssociating Member of Resigning Manager
Filing Fee:	` • • · · · · · · · · · · · · · · · · ·
Certified Copy:	\$30.00 (Optional)