L 000 000 03426

(Re	questor's Name)	
,	•	
(Add	dress)	
(Ade	dress)	
(Cit	y/State/Zip/Phone #)	_
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Name)	
		;
(Doc	cument Number)	· ·
Certified Copies	_ Certificates of	Status
Special Instructions to I	Filing Officer:	
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SECHETARY OF STATE SECHETARY OF STATE

FILED

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: KIS LLC (Name of Limited Liability Cor	npany)	
The enclosed member, managing member or manager resig filing.	gnation and fee(s) are submitted	l for
Please return all correspondence concerning this matter to:		
GLADYS PATINO		
(Contact Person)	_	
KIS LLC	_	97
(Firm/Company)		
P.O. BOX 453200	_	OT JUN 20 AM 10: 45 SECHETARY OF STATE TALLAHASSEE. FLORID
(Address)		TO H
MIAMI, FL. 33245	_	STATE STATE
(City/State and Zip Code)		7
For further information concerning this matter, please call:		
GLADYS PATINO at (305	372-0404	-
(Name of Contact Person) (Area Code	e & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida I \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

Tallahassee, Florida 32301

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the limited liability company as it a	ppears on the records of the Florida Department
of State is: KIS LLC	
2. This limited liability company was organized un FLORIDA	der the laws of: State of Sta
3. The Florida document/registration number of thi L00000003426	s limited liability company is:
4. I, GARY SISLER	_, hereby resign as a MANAGER/DIRECTOR
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the line resignation in writing.	nited liability company has been notified of my
Con Sist	2
Signature of Resigning Member, Managing Mem	ber or Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	