

L02000013884

(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



700045851577

03/22/05--01030--006 \*\*85.00

FILED  
05 MAR 25 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten:* 3-25-05-121125

**PINEIRO, WORTMAN & BYRD, P.A.**

*Attorneys at Law*

ANDREW A. PINEIRO  
SCOTT J. WORTMAN\*  
BARRY B. BYRD<sup>+</sup>

LINDA ROCKER<sup>°</sup>

[www.pwbattorneys.com](http://www.pwbattorneys.com)

*\*Also admitted in New York and New Jersey*

*+Board certified real estate attorney*

*°Also admitted in Ohio*

*°Of Counsel*

March 17, 2005

**VIA CERTIFIED MAIL**

Florida Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314  
Attention: Thelma Lewis - Document Specialist Supervisor

Re: Resignation of Registered Agent Status:  
KL Florida, LLC  
KL Financial Group DC Fund, LLC  
KL Triangulum Management, LLC  
KL Financial Group DB Fund, LLC  
KL Financial Group Florida, LLC  
KL Financial Group IR Fund Florida, LLC  
KL Triangulum Fund, LLC

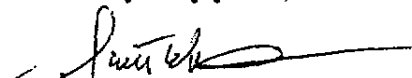
Dear Ms. Lewis:

Pursuant to your request enclosed please find individual executed Resignation of Registered Agent for a Limited Liability Company form for each of the above entities along with seven separate checks in the amount of \$85.00 for each of these filings.

Please make the necessary adjustments on the Department of State - Division of Corporations records.

Thank you for your prompt attention to this matter.

Very truly yours,

  
Scott J. Wortman

SJW/tlk

**RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY**

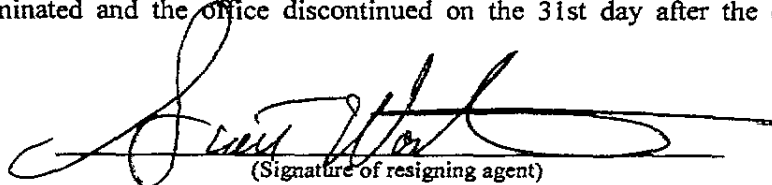
Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Pineiro, Wortman & Byrd, P.A., hereby resigns as  
(Name of Registered Agent)

Registered Agent for KL Financial Group Florida, LLC  
(Name of Limited Liability Company)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

  
(Signature of resigning agent)

If signing on behalf of an entity:

Scott Wortman  
(Typed or printed name)  
President  
(Capacity)

**FILED**  
05 MAR 25 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEES:**

- \$ 85.00 Active Limited Liability Company
- \$ 25.00 Dissolved Limited Liability Company

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314