

LO5000054045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

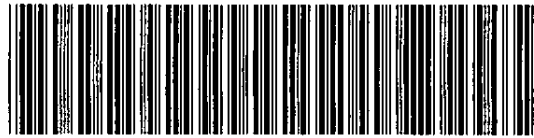
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 SEP 18 PM 4:02

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 6, 2007

JOHN J. COX III
KENILWORTH ESTATES LLC
7015 PROFESSIONAL PKWY. E.
SARASOTA, FL 34240

SUBJECT: KENILWORTH ESTATES LLC
Ref. Number: L05000054045

We have received your document for KENILWORTH ESTATES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock
Senior Section Administrator

Letter Number: 007A00053147

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KENILWORTH ESTATES, LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

JOHN J. COX III
(Contact Person)

KENILWORTH ESTATES, LLC
(Firm/Company)

7015 PROFESSIONAL PARKWAY E.
(Address)

SARASOTA, FL 34240
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN J. COX III at (941) 907-9099
(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

*PREVIOUSLY
PAID*

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: KENILWORTH ESTATES, LLC

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
L05000054045

4. I, VANESSA SAMPSON, hereby resign as a SEC/TREAS
(Print Name of Person Resigning) *(Print Title)*

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

Vanessa Sampson

Signature of Resigning Member, Managing Member or Manager

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