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COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Kokomo Publishing, LLC (Name of Limited Liability Company) |
| Dear Sir or Madam: |
| The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Annie Roc (Name of Person) |
| Kokomo Publishing, IKC |
| PO. Bx 9102 (Address) |
| Miramar Reach FL. 32550 (City/State and Zip Code) |
| For further information concerning this matter, please call: \$50 - \(\partial \frac{3052}{60} \) |
| Daniel W. Dovall at 850 974-16575 Cell (Name of Person) (Area Code & Daytime Telephone Number) |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building C661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |
| Enclosed is a check for the following amount: |

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

| I, Annie Roe hereby resign as Managing Mem | ber |
|--|-----------------|
| of Kokomo Pohishing, LLC, (Limited Liability Company) | |
| a limited liability company organized under the laws of the State of Foricia. | |
| and affirm that the limited liability company has been notified in writing of the resignation. | |
| (Signature of resigning manager, managing member or member) (Signature of resigning manager, managing member or member) | - |

FILING FEE IS \$25.00

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

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