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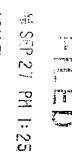
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EXAMINER



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COVER LETTER

Division of Corporations	
SUBJECT: KEA ENT (RPRISES, L (Name of Limited Liability Company)	L C
The enclosed member, managing member or manager resignation and filing.	ee(s) are submitted for
Please return all correspondence concerning this matter to:	
BRUNO KEKE (Contact Person)	
ILERA ENTERPRISE LLC (Firm/Company)	
663 KNG HAROLD COURT (Address)	
OVIEDO RL 32765 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) (Area Code & Daytime 1	Celephone Number)
Enclosed please find a check made payable to the Florida Department of \$25 Filing Fee \$55 Filing Fee Certified	of State for: ee & Copy
Registration SectionRegistratioDivision of CorporationsDivision ofClifton BuildingP.O. Box 6	Corporations

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

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	lity company was organ		:			
L0500	ment/registration number POI2194 \	t .		PRE	31 D(~	<u> </u>
	A NWOGWU une of Person Resigning) ility company and affirating.					
Signature of Resignature	Cycles gning Member, Managin	ng Member or Manage	r	TOPE .	i s	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				SEP 27 PM 1:2	The state of the s