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(Re	questor's Name)	
(Ad	dress)	······································
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(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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05/11/07--01010--025 **25.00

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: KT & KT Investm (Name of Limit	TENT GROUP L.L.C. ted Liability Company)	
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for	
Please return all correspondence concerning t	his matter to:	
KENOL JAY SEUS (Contact Person)		
(Firm/Company)		
7515 WOODLAND CREEK	LANE So S))
LAKE WORTH, FL 334 (City/State and Zip Code)	117	E
For further information concerning this matter	er, please call:	-
Name of Contact Person)	at (561) 502 - 7535 (Area Code & Daytime Telephone Number)	•
Enclosed please find a check made payable to \$25 Filing Fee		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	

2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (5/06)

Tallahassee, Florida 32314

FILED



FLORIDA DEPARTMENT OF STATE . DIVISION OF CORPORATIONS

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

	limited liability company as	s it appears on the records of the Flor	rida Depart	ment 	
	lity company was organized	d under the laws of:		0	
STATE OF	FLORIDA	 -	SECA	7 MMY	
L06000 4.1, Kénol	0051083	of this limited liability company is:, hereby resign as a MANAG	HASSEE, FLORIDA IN Title)		
of this limited liab resignation in write		ne limited liability company has been	notified o	fmy	
Signature of Resig	gning Member, Managing N	Member or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				