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Certified Copies	_ Certificates.	of Status		
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SECRETARY OF STALE TALLAHASSEE, FLORID

PAIRES
12/1/09

COVER LETTER

TO: Amendment Section . Division of Corporations

'n

SUBJECT: K.G. Beach Townhomes, LLC	
(Name of Limited Liability Company)	
DOCUMENT NUMBER: L07000009607	
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are subm for filing.	ittec
Please return all correspondence concerning this matter to the following:	
Brenden S. Moriarty, Esq.	
(Name of Person)	
Peebles & Moriarty, P.A.	
(Name of Firm/Company)	
1111 3rd Avenue W., Suite 210	
(Address)	
Bradenton, Florida 34205	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Brenden S. Moriarty, Esq. at (941) 744-0075 (Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 608.416(2) of	or 608.509, Florida Sta	atutes, the undersigned,	
Peebles & Moriarty	, P.A.		, hereby resigns as	
	(Name of Registered Agent)			
Registered Agent for K	.G. Beach Townhom	nes, LLC		
				······•
	(Name of Limited	d Liability Company)		
L07000009607				
(Document Number	er, if known)	-		
A copy of this resignatio	n was mailed to the abov	ve listed limited liabilit	ty company at its last known ad	dress.
The agency is terminated	l and the office discontin	ued on the 31st day af	ter the date on which this staten	nent is filed.
	3 C	gnature of Resigning Agen		
If signing on behalf of ar	entity:			
	Brend	len S. Moriarty		- 7°S
		d or Printed Name)		SER.
	V	/ice-President		9 EE-
	(1	Capacity)		ECRETARY OF NOV 23
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	\$ 85.00 A \$ 25.00 A	ctive limited liability	company lyed/ voluntarily dissolved/	* 7
	φ 25.00 A W	vithdrawn limited liab	oility company	

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