## L08000037398

(Requestor's Name)
(Address)
/A.I.I.
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
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SECRETARY OF STATE

J. BRYAN

MAR -1 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: KMBICE ENTERPRISES L (Name of Limited Liability Co	Mpany)	_ <del>_</del>		
The enclosed member, managing member or manager resifiling.	gnation and fee(s) are submit	tted for		
Please return all correspondence concerning this matter to	:			
ANN BOBENEIETH (Contact Person)	_			
KMBICE ENTERPRISES, LLC (Firm/Company)	_	SECRETARY OF STATE FALLAHASSEE, FLORIC	in FER 26 PM	•
POCA RATON FL 33434  (City/State and Zip Code)	- -	STATE	2: 50	
For further information concerning this matter, please call	:			
ANN BOBENRIETH at (50) (Name of Contact Person) (Area Code	251 - 6418 e & Daytime Telephone Number	er)		
Enclosed please find a check made payable to the Florida \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy			
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	ı		

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

I. The name of the limited liability company as it appears on the records of the Florida Depos of State is: KMBICE ENTERDRISES, LLC	eartment
2. This limited liability company was organized under the laws of:  FLOCIDA  ARE	FIL 10 FEB 26
3. The Florida document/registration number of this limited liability company is:  L0800037398	PH 2: 50
4. I, KEITH BOBENRIETH, hereby resign as a WNBR (Print Name of Person Resigning) (Print Title)  of this limited liability company and affirm the limited liability company has been notifie	
resignation in writing.  Signature of Resigning Member, Managing Member or Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	