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SECRETARY OF STATE DIVISION OF CURPORATION

COVER LETTER

Division of Corporations			
SUBJECT: Floridg IP Holdings LCC (Name of Limited Liability Company)			
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to:			
Kimber Remodels (Contact Person)			
Florida IP Hollings LCC			
15275 Collin God PMB 201-275			
Naples, FC 34119 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Contact Person) (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy			
STREET/COURIER ADDRESS: Registration Section MAILING ADDRESS: Registration Section			

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (5/06)

Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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 it appears on the loridg IP Hollings L	
2. This limited liab	lity company was organized under the laws of	f:
3. The Florida docu	ment/registration number of this limited liabil	
4. I, Kimb	PROPERTY Resigning), hereby resignate of Person Resigning)	gn as a MGR (Print Title)
of this limited liab resignation in wri	oility company and affirm the limited liability ting.	
Signature of Resi	$\frac{\sqrt{5/08/2012}}{\text{gning Member, Managing Member or Manage}}$	<u> </u>
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	SECRETA DIVISION OF 12 HAY 1