

| (Requestor's Name) |
|-----------------------------------------|
| |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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12/22/10--01028--011 **25.00

G. MCLEOD

DEC 23 2010

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations |
|---------------------------------------------------------------------------------------------------|
| SUBJECT: KPMG INVESTMENTS LLC |
| (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: |
| MASSINO GENTILE |
| MASSIMO GENTILE (Contact Person) |
| KPHG INVESTHENTS LLC (Firm/Company) |
| (|
| 934 BRIAKWOOD BLVD (Address) |
| (Address) |
| NAPLES FL 34104 (City/State and Zip Code) |
| (City/state and Zip Code) |
| For further information concerning this matter, please call: |
| MASSIMO GENTIUE at (239) 961-0967 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| (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 \$55 Filing Fee & |
| Certified Copy |
| STREET/COURIER ADDRESS: MAILING ADDRESS: |
| Registration Section Registration Section |
| Division of Corporations Division of Corporations |
| Clifton Building P.O. Box 6327 |
| 2661 Executive Center Circle Tallahassee, Florida 32314 |
| Tallahassee, Florida 32301 |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| 1. The name of the of State is: | limited liability company as i | t appears on the records | of the Florida Depar | tment | |
|---------------------------------|------------------------------------------------------------------|----------------------------|------------------------|-----------|--------|
| 2. This limited liab | ility company was organized | under the laws of: | | | |
| 3. The Florida doc | ument/registration number of 023076 | this limited liability com | npany is: | | |
| (Print N | PASTOR Jame of Person Resigning) bility company and affirm the | | (Print Title) | — of my | |
| resignation in wr | iting. | | 2-1 | · | |
| | gning Member, Managing Mo | ember or Manager | SECRETAR) ALLAHASSE | 10 DEC 22 | - 79 - |
| _ | \$25.00 (Required) \$30.00 (Optional) | | SEE, FLO | 2 PM 12: | |