

10/25/2013 1:06 FAX 07423111

DEAN MEAD ORLANDO

Division of Corporations

Page 1 of 1

L12000056288

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000237814 3)))



H130002378143ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407) 841-1200
Fax Number : (407) 423-1931

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jsmith@smithcompanies.com

LLC REGISTERED AGENT RESIGNATION
KMD GMS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

CHE 027348/056777

RECEIVED

13 OCT 25 AM 7:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

FILED
2013 OCT 25 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

((H13000237814 3)))

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Dean Mead Services, LLC

, hereby resigns as

Name of Registered Agent

Registered Agent for **KMD GMS, LLC**

Name of Limited Liability Company

L12000056288

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


Signature of Resigning Agent

If signing on behalf of an entity:

Charles H. Egerton

Typed or Printed Name

Vice President

Capacity

FILED
2013 OCT 25 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

INHS17 (08/05)

932719.pdf

((H13000237814 3)))