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TO: Reg	stration Section		. ,
Div	ision of Corporations		•
SUBJECT	. KITHERON HOLDINGS, LLC		
SOD, Let		imited Liability Co	empany)
The enclose	ed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please retur	rn all correspondence concernin	g this matter to:	:
BRIAN PYB	US. CPA		
	(Contact Person)		_
PYBUS & CO	OMPANY PA		
	(Firm/Company)		_
824 US-1 SU	HTE 240		
	(Address)		
NORTH PAL	LM BEACH FL 33408		
	(City/State and Zip Code)		_
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BRIAN PYB	US	561 at (282-1870 EXT 3
(Name of Contact Person)		e & Daytime Telephone Number)
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Reg Div P.O	ling Address: gistration Section rision of Corporations b. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

The Florida docu £12000130534	ment/registration number assigr	ned to this limited liability com	pany is:	
The date this mer	nber/manager withdrew/resigne	- d or will withdraw/resign is: _, hereby withdraw/resign as a	S	
(Print Name of Person Resigning) Authorized Member	_, nereo, willouwreingil as u	7 4 P!	1	
•	Print Title) ility company and affirm the lin	nited liability company has bee	n notified of	my
D. A. k)			