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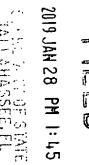
Special Instructions to Filing Officer:			

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COVER LETTER

SUBJECT: Kimbrough Property Group LLC

Name of Limited Liability Company DOCUMENT NUMBER: L16000016903 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Janna Pantoja

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

TO: Registration Section Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	sions of section 605.0115, Florida Statutes, the unde	ersigned.	
United States Corporation Agents, Inc her		_ , hereby resigns as	
		- 1	
Registered Agent for	Kimbrough Property Group LLC		_
	Name of Limited Liability Company		_•
L16000016903			
Document	Number, if known		
A copy of this resigna	ation was mailed to the above listed limited liability	company at its last known address	
The agency is termina	signature of Resigning Agent	<u>.</u>	
If signing on behalf or	f an entity:	13) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	;
	Cheyenne Moseley	ZUI9 JAN 28	
	Typed or Printed Name Asst. Secretary for United States Corporation Ac Capacity	(/) ·	-
		· 👼 🕏	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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