

Division of Corporations Public Access System

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.

(((H08000277425 3)))



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) 617-6380

From:

Account Name : INCORPORATING SERVICES FL

Account Number : I20050000052 Phone : (302)531-0855

Fax Number

: (866)223-0765

REGISTERED AGENT RESIGNATION

K & S FOREST LAKE, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$87.50 |

Electronic Filing Menu

Corporate Filing Menu

-

H08000277425 3

TRANSMITTAL LETTER

| TO: | Amendment Section Division of Corporations | | |
|---------|--|------------------------|--|
| SUR | DECT: K&S FOREST LAKE, | , LLC | |
| ,,,,,,, | (Nan | ne of Limited Liabilit | y Company) |
| DOC | UMENT NUMBER: M020000 | 03066 | |
| The e | | d Agent for a Limite | ed Liability Company and fee are submitted |
| Pleas | e return all correspondence conce | rning this matter to | the following: |
| TUN | IISHA SCOTT | | |
| | (Name of Person) | | _ |
| INC | ORPORATING SERVICES, LT | ΓD. | r |
| | (Name of Firm/Comp | any) | _ |
| 350 | S. DUPONT HWY, | | |
| | (Address) | | _ |
| DO | /ER, DE 19901 | | |
| | (City/State and Zip Co | ođe) | _ |
| For f | urther information concerning this | matter, please call: | |
| TŲN | IISHA SCOTT | at (302 | 531-0855 de & Daytime Telephone Number) |
| | (Name of Person) | (Area Co | de & Daytime Telephone Number) |

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

INHS 17(11/02)

H08000277425 3

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provisi | ons of section 608.416(2) or 60 | 8.509, Florida Statutes, the t | indersigned, | |
|-------------------------|----------------------------------|---|-----------------------------------|--------|
| INCORPORATIN | G SERVICES, LTD. | . hereby | resigns as | |
| | (Name of Registered Agent) | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | /\ 0 | |
| Registered Agent for_ | K & S FOREST LAKE, L | LC | | |
| | (Name of Limited Liab | ility Company) | | |
| M02000003066 | | | | |
| (Document No | mber, if known) | | | |
| ~~ | tion was mailed to the above lis | | | |
| The agency is termina | (Sides t | on the 31st day after the date | on which this statement is filed. | 1 1 |
| If signing on behalf of | an entity: | | DEC 29 CKETAR LAHASS | ŋ |
| | CANDICE B. SWETLA | ND | ASS ASS | |
| | (Typed or F ASSISTANT SECRET | rinted Name) 'ARY | PH. | EU |
| | (Caped | city) | 2: 05 STATE LORIDA | |

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company