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KLMK GROUP LLC

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COVER LETTER

	O.		•
TO: Registratio Division of	n Section f Corporations		
SUBJECT: KLA	/IK Group, LLC (Name of Fo	reign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withd	rawal and fee(s) are submitte	ed for filing.	
Please return all cor	respondence concerning this	matter to the following	5 *.
Judy Lin Bris	tow, Esq. (Name of Person)	An annual de la companya de la comp	
Williams Mul	len (Plan Popularia)		
e e e e e e e e e e e e e e e e e e e	(Firm/Company)		•
200 S. 10th	Street, Suite 1600		
	(Address)		
Richmond, V	/A 23219		
	(City/State and Zip Coc	ie)	
For further informat	ion concerning this matter, p	please callf	
Sharon Carro	ome of Person)	at (804 (Area Code &) 420-6580 Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check	for the following amount:	1	,
□ \$25 Piling Fee	Certificate of Status	\$55 Filing Fee & Certified Copy	Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

KLMK Group, LLC
(Name of limited liability company)
Virginia
(Jurisdiction of its organization)
M06000004371
(Florida Document Number)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
100 W. Franklin Street, Suite 200 (Mailing address)
Transmisting and south
Richmond, VA 23220
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of member or authorized representative of a member)
Nohn B. Kemper, Chief Executive Officer
(Typed or printed name of signee)

Filing Fee: \$25.00