

M14000004888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**5325 KPD, LLC**

**SUBJECT:** \_\_\_\_\_  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Luke Widmer**

\_\_\_\_\_  
(Name of Person)

**American Management Specialists**

\_\_\_\_\_  
(Firm/Company)

**P.O. Box 69-2049**

\_\_\_\_\_  
(Address)

**Orlando, FL 32869**

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

**Luke Widmer**

**407 468-9701**

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Area Code & 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:**

- \$25 Filing Fee       \$30 Filing Fee & Certificate of Status       \$55 Filing Fee & Certified Copy       \$60 Filing Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

5325 KPD, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

July 10, 2014

(Date registered with Florida Department of State)

M14000004888

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

(Signature of authorized representative)

Luke Widmer

(Typed or printed name of signee)

Filing Fee: \$25.00

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