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Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

APR 21 2008

EXAMINER

CT 111 Eighth Avenue New York, NY 10011

212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

April 14, 2008

RE: KFS FINANCIAL LLC. (DE. DOM.)

Department of State Division of Corporations Clifton Building 261 Executive Center Circle Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is $\underline{1}$ check in the amount $\underline{25.00}$ to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 608.416(2) or 608.509, Florida State	utes, the undersigned,	
C T CORPORATION SYSTEM , hereby (Name of Registered Agent)		hereby resigns as	
		, 111100 y 11019210 111	
Registered Agent for	KFS FINANCIAL LLC. (DE. DO	M.)	
	(Name of Limited Liability Company)	,	
M97000	0000333		
(Document Num	ber, if known)		
The agency is terminated	d and the office discontinued on the 31st day after (Signature of Resigning Agent)	r the date on which this statement is filed.	
If signing on behalf of an entity:		0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	
C T CORPORATION SYSTEM - Theresa Alfieri		fieri APR APR	
	(Typed or Printed Name) ASSISTANT SECRETARY	18	
	(Capacity)	AM II: 38	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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