P010005/54/

(Requestor's Name) (Address)
(Address)
(/11/51/5)
(City/State/Zip/Phone #)
(Oity/Otate/Zip/) Hone #/
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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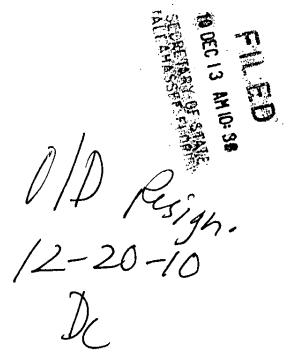
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	KMC Corporation (Name of Corporation)
DOCUMENT NUMBER:	01000051541
	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
Ron Finger	
(Name of	Person)
KMC Corporation	
(Name of Firm	(Company)
20 SW 27th Ave. Suite 300	
(Addre	ess)
Pompano Beach, FL 33069	
(City/State and	l Zip Code)
For further information concerns	ing this matter, please call:
Ronald Finger	at (954) 969-9800
(Name of Person)	at (954) 969-9800 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 r	nade payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

T. Don Markey	, hereby resign as	VP & CFO	
**	, norder resign as	(Title)	
of KMC Corporation			
	e of Corporation)		
P01000051541 (Document Number, if known)	, a corporation organized under the laws of the State of		
Florida	·	·	

(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314