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SECRETARY OF STATE
DIVISION OF BORPORAMONS

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TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUBJ	IECT: Kimble/Brown Enterprises, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P03000092643
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
Lesli	e Gross
	(Name of Person)
Kimb	ole/Brown Enterprises, Inc.
	(Name of Firm/Company)
5220	NW 44th Place
	(Address)
Gain	nesville/FL/32606
	(City/State and Zip Code)
For fo	urther information concerning this matter, please call:
Kevi	n Brown at (352)870-9900 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis P.O.	ing Address: Independent Section Ition of Corporations Box 6327 hassee, FL 32314 Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Leslie Gross	, hereby resign as	OFFICER/UP	
		(Title)	
of Kimble Brown	Enterprises	Inc.	
(Name o	f Corporation)		
P0300092643, a corporation organized under the laws of the State of (Document Number, if known)			
FL.			

Signature of resigning officer/director) 7/17/15

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

SECRETARY OF STALE DIVISION OF GORPORATION