

R.A. Resignation  
LFG  
2-23-05

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** K.P.S. CO.  
(Name of Limited Liability Company)

**DOCUMENT NUMBER:** PO 400005601

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ravindra Ramnarace  
(Name of Person)

K.P.S. CO.  
(Name of Firm/Company)

903 W. Browne St.  
(Address)

Lantana, FL 33462  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ravindra Ramnarace at (561) 324-3153  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

February 2, 2005

RAVINDRA RAMNARACE  
903 W. BROOME STREET  
LANTANA, FL 33462

SUBJECT: K.P.S. CO.  
Ref. Number: P04000005601

We have received your document for K.P.S. CO. and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

To resign as registered agent for an active corporation, the enclosed resignation form should be completed and returned with a filing fee of \$87.50.

A balance of \$2.50 is due for the resignation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain  
Document Specialist

Letter Number: 805A00007510

RECEIVED

05 FEB 14 AM 10:36

DIVISION OF CORPORATIONS

FILED

2005 FEB 18 PM 1:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Ravindra Samnani  
(Name of Registered Agent)

hereby resigns as Registered Agent for K.P.S. CO.  
(Name of Corporation)

PO4000005601  
(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which  
this statement is filed.

[Signature]  
(Signature of Resigning Agent)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporation

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314