

P93000084739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KH OF SW FLORIDA, INCORPORATED
(Name of Corporation)

DOCUMENT NUMBER: P93000084739

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

HEIKE BUSBY

(Name of Person)

ALLURE ACCOUNTING, LLC

(Name of Firm/Company)

3665 BONITA BEACH ROAD, STE. 3

(Address)

BONITA SPRINGS, FL 34134

(City/State and Zip Code)

For further information concerning this matter, please call:

MARENA LOEFFLER

(Name of Person)

at (239) 992-3355

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made 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

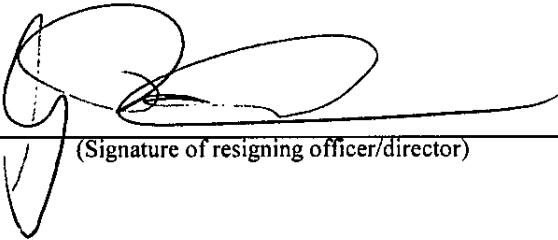
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GABRIELE BOECKMANN, hereby resign as PRESIDENT/DIRECTOR
(Title)

of KH OF SW FLORIDA, INCORPORATED,
(Name of Corporation)

P93000084739, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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