

L090000080377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 OCT 16 AM 8:24

FILED

J. SAULSBERRY
EXAMINER

OCT 17 2012

CFRA, LLC

A Subsidiary of CARLTON FIELDS

Registered Agent Services

100 S. Ashley Drive | Suite 400

Tampa, Florida 33602

P. O. Box 3239 | Tampa, Florida 33601-3239

813.223.7000 | fax 813.229.4133

October 12, 2012

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

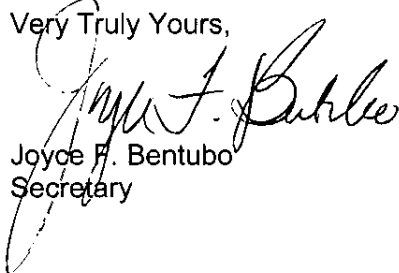
**Re: RESIGNATION OF REGISTERED AGENT -
AKINORI ENTERPRISES LLC
BIOXIDEA COSMETICS USA LLC
CIELO APARTMENTS, LLC
HOLLOWAY CUSTOM HOMES, LLC
INSTITUTO SAN JOAQUIN DE FLORES USA, LLC
KKG HOLDINGS, LLC
LEADERSHIP SOLUTIONS FLORIDA, LLC
MAYA REMESAS, LLC
RP2&6 LENDER LLC
RP2&6 LENDER MANAGER LLC**

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TALLAHASSEE, FLORIDA

Gentlemen:

Please find enclosed Resignation of Registered Agent forms for the above referenced entities. Also enclosed is Carlton Fields' Check No. 527512 totaling \$250.00 for the filing fees for these entities.

Very Truly Yours,


Joyce F. Bentubo
Secretary

JFB/lrf
Enclosures

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

CFRA, LLC

Name of Registered Agent

, hereby resigns as

Registered Agent for AKINORI ENTERPRISES LLC

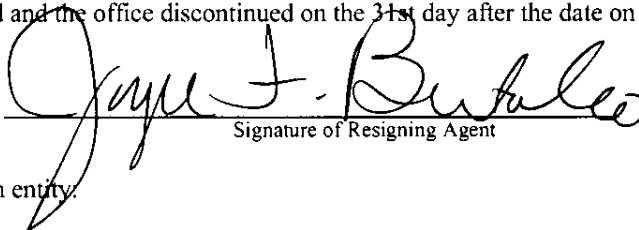
Name of Limited Liability Company

L09000080377

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company 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 of Resigning Agent

If signing on behalf of an entity:

Joyce F. Bentubo

Typed or Printed Name

Secretary

Capacity

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2012 OCT 16 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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