

LD4000057162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

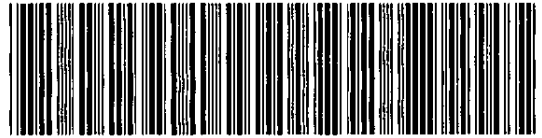


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE

JUN 30 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2009

OCTAVIO RODRIGUEZ
2199 PONCE DE LEON BLVD., SUITE 200
CORAL GABLES, FL 33134

SUBJECT: INTERNATIONAL BUSINESS GROUP, LLC
Ref. Number: L04000057162

We have received your document for INTERNATIONAL BUSINESS GROUP, LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The effective date must be specific and cannot be prior to the date of filing.

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) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 709A00020803

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: International Business Group, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: _____

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:

Octavio Rodriguez
Name of Person

International Business Group, LLC
Name of Firm/Company

21990 Ponce de Leon Blvd, Suite 200
Address

Coral Gables, FL 33134
City/State and Zip Code

orodriguez@romo3000.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Octavio Rodriguez at (305) 525-6071
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
2009 JUN 29 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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,

MICHAEL STUART SMITH, hereby resigns as
Name of Registered Agent

Registered Agent for INTERNATIONAL BUSINESS GROUP LLC

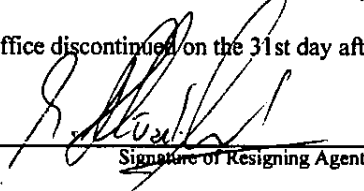
Name of Limited Liability Company

L04.000057162

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:

Michael Stuart Smith
Typed or Printed Name

Capacity

2009 JUN 29 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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