L05000111024

(Rec	questor's Name)				
(Address)					
(Address)					
(City	//State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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SEGRETARY OF STATE DIVISION OF CORPORATIONS

C. LEWIS

OCT 29 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: 1-ones 2 Go. LLC (Name of Limited Liability Company)				
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
Candice Soogein (Contact Person)				
Fones 2 Go, LLC (Firm/Company)				
103-30 68th Ave, Apt#46 (Address)				
Forest Hills, NY 10375 (City/State and Zip Gode)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (347) 600-2009 (Area Code & Daytime Telephone Number)				
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327				

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



SEGRETARY OF STATE DIVISION OF CORFORATIONS 2012 OCT 26 PM 2: 13

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	imited liability company as Fones 260, U	• •	of the Florida Department
2. This limited liabi	lity company was organized	under the laws of:	
Florida		·	
3. The Florida docu	ment/registration number of	this limited liability con	npany is:
	me of Person Resigning)		
of this limited liab resignation in writ	vility company and affirm the ting.	e limited liability compa	ny has been notified of my
Signature of Resig	gning Member, Managing M	ember or Manager	
_	\$25.00 (Required) \$30.00 (Optional)		