## L060000075119

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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Alesign News 6-24-08



## **COVER LETTER**

**MAILING ADDRESS:** 

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section

TO: Amendment Section Division of Corporations
•
SUBJECT: GIGI'S CAFE OF PSJ, LLC
(Name of Limited Liability Company)  DOCUMENT NUMBER: L06000075119
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:
KIMBERLY MAGGARD
(Name of Person)
(Name of Firm/Company)
5435 FLORIDA PALM AVENUE
(Address)
CANAVERAL GROVES, FL 32926 (City/State and Zip Code)
For further information concerning this matter, please call:
KIMBERLY MAGGARD (Name of Person) at ( 321 ) 302-1312 (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

STREET ADDRESS:

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Amendment Section



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 13, 2008

KIMBERLY MAGGARD 5435 FLORIDA PALM AVE COCOA, FL 32927

SUBJECT: GIGI'S CAFE OF PSJ, LLC

Ref. Number: L06000075119

We have received your document for GIGI'S CAFE OF PSJ, LLC and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to resign as registered agent of an active limited liability company is \$85.00.

There is a balance of \$25.00 due to file 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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 808A00036362

W19/08

ied-has been paid

SECRETARY OF STATE ARGIDA

. 2008 HA ES NUL 8005

RECEIVED



April 10, 2008

KIMBERLY MAGGARD 5435 FLORIDA PALM AVENUE CANAVERAL GROVES, FL 32926

SUBJECT: GIGI'S CAFE OF PSJ, LLC

Ref. Number: L06000075119

We have received your document for GIGI'S CAFE OF PSJ, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active limited liability company is \$85.00.

The total amount due is \$60.00.

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) 245-6901.

Letter Number: 308A00021420

Susan Payne Senior Section Administrator

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida	
KIMBERLY MAGGARD	, hereby resigns as
(Name of Registered Agent)	, nereby resigns as
Registered Agent for GIGI'S CAFE OF PSJ, LLC	- 19 To
	E P
(Name of Limited Liability Company	y) Contract of
L06000075119	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed limited l	iability company at its last known address.
The agency is terminated and the office discontinued on the 31st of	day after the date on which this statement is filed.
Runble Ma (Signature of Resigning	olefall
If signing on behalf of an entity:	
KIMBERLY MAGGARD	
(Typed or Printed Name)	
MEMBER/MANAGER	<del></del> -
(Capacity)	

**FILING FEES:** \$ 85.00 Activ \$ 25.00 Admi Active limited liability company
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