

L07000035/33

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

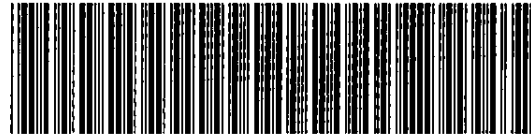
Special Instructions to Filing Officer:

A. LUNT

DEC 14 2010

EXAMINER

Office Use Only



200185849022

09/29/10--01005--013 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 DEC 13 PM 1:00

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 30, 2010

AMY GALLO
3111 N. OCEAN DR. #505
HOLLYWOOD, FL 33019

SUBJECT: FEMALE INNOVATIONS, LLC
Ref. Number: L07000035133

We have received your document for FEMALE INNOVATIONS, 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The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file an annual report with our office. Therefore, the document you submitted cannot be filed until the entity is reinstated on our records. The required reinstatement application, which takes the place of the annual report(s) due, must be submitted online at www.sunbiz.org. Simply click on the blue box entitled "File A Reinstatement Here!," which is located in the middle of our home page.

Once the reinstatement is submitted online, our system will allow you to choose one of three payment options. The three payment options are: 1. online by credit card; 2. online by pre-established Sunbiz E-File account; or 3. by mail with a check or money order. To pay online using a credit card, simply select the credit card option and enter your credit card information. Business entities with pre-established Sunbiz E-File accounts may choose the Sunbiz E-File account option. Entities paying by check or money order must select the check payment option, print the required payment voucher, and mail the check payment voucher with a check or money order made payable to the Florida Department of State for the total amount due.

If you choose to pay the required reinstatement fee(s) online using a credit card or Sunbiz E-File account, please contact me when the reinstatement filing has posted. If you choose to pay the required fee(s) by check or money order, please mail the check payment voucher and check or money order to my attention.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 410A00023240



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2010

AMY GALLO
3111 N. OCEAN DR. #505
HOLLYWOOD, FL 33019

SUBJECT: FEMALE INNOVATIONS, LLC
Ref. Number: L07000035133

We have received your document for FEMALE INNOVATIONS, 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):

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

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 910A00027690

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FEMALE INNOVATIONS LLC
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: LO7000035133

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Amy Gallo

Contact Person

Female Innovations, LLC

Firm/Company

3111 N Ocean Dr. #505

Address

Hollywood, FL. 33019

City, State and Zip Code

tamiria21@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy

Name of Contact Person

at (561) 702-1787

Area Code and Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for:

☐ \$87.50 Filing Fee

☐ \$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
2010 DEC 13 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: FEMALE INNOVATIONS, LLC

2. This limited liability company was organized under the laws of:

FLORIDA

3. The Florida document/registration number of this limited liability company is:

L07000035133

4. I, Amy Gallo, hereby resign as a MANAGER
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Amy Gallo
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)