

L08000085499

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(Business Entity Name)

L08-85499

(Document Number)

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11 SEP 27 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP 27 2011

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NL Farming, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L08000085499

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:

Pedro Campos
Name of Person

Name of Firm/Company

2182 Stacil Circle
Address

Naples, FL 34109
City/State and Zip Code

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

For further information concerning this matter, please call:

Pedro Campos at (239) 598-3127
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2011

PEDRO CAMPOS
2182 STACIL CIRCLE
NAPLES, FL 34109

SUBJECT: N L FARMING, LLC
Ref. Number: L08000085499

We have received your document for N L FARMING, 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.

Note the additional filing fee.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 111A00021199

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,

Gabriela Asis

Name of Registered Agent

, hereby resigns as

Registered Agent for

N L Farming, LLC

Name of Limited Liability Company

L08000085499

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.

Gabriel Asis

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILED
11 SEP 27 AM 10:11
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