

L09000000199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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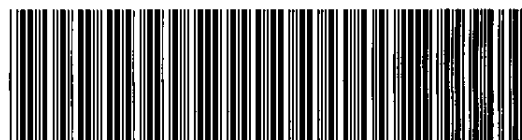
(Business Entity Name)

(Document Number)

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2010 NOV 30 PM 3:03

C. LEWIS
Dec. 1 2010
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: UMBRELLA ENTERPRISE GROUP LLC
Name of Limited Liability Company

DOCUMENT NUMBER: LO9000000199

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:

ANGELA KELLY
Name of Person

Name of Firm/Company

3631 NW 30th ST
Address

LAUDERDALE LAKES FL 33311
City/State and Zip Code

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

For further information concerning this matter, please call:

ANGELA KELLY at (954) 804-2237
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

November 23, 2010

ANGELA KELLY
3631 NW 30TH STREET
LAUDERDALE LAKES, FL 33311

SUBJECT: UMBRELLA ENTERPRISE GROUP LLC.
Ref. Number: L09000000199

We have received your document for UMBRELLA ENTERPRISE GROUP 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 a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 910A00027478



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
2010 NOV 30 PM 3:00
TALLAHASSEE, FLORIDA

**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: UMBRELLA ENTERPRISE GROUP 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:
LO9006000199.

4. I, ANGELA KELLY, 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.

Signature of Resigning Member, Managing Member or Manager

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