

L09000047999Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000079900 3)))



H100000799003ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FABULOUS MIAMI, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

A. LUNT
APR 13 2010
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FABULOUS MIAMI, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

re-faxing

4/8/2010

<https://efile.unbiz.org/scripts/efilcovr.exe>

no confirmation yet received

RECEIVED

10 APR 12 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04/08 13:15
18506176383
00:01:01
03
OK
STANDARD
ECM

DATE, TIME
FAX NO./NAME
DURATION
PAGE(S)
RESULT
MODE

TIME : 04/08/2010 13:15
NAME : EMPIRE CORP KIT
FAX : 3056339696
TEL : 3056343694
SER.# : BR06J504820

TRANSMISSION VERIFICATION REPORT

③

H10000079900

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FABULOUS MIAMI, 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:

DAVID L. WRUBEL, CPA

(Contact Person)

DAVID L. WRUBEL, CPA, PA

(Firm/Company)

560 LINCOLN ROAD, #304

(Address)

MIAMI BEACH, FL 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID L. WRUBEL, CPA at (305) 672-4272

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

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

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

(231-979) (5-06)

H10000079900

2010 APR - 8 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



H10000079900

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

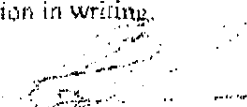
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: FLORIDA

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

3. The Florida document/registration number of this limited liability company is:
L09000047999

4. I, ALEXIS GERMAN, hereby resign as a MGRM
(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)

CR38079 (2-06)

H10000079900

FILED

2010 APR - 8 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA