

L10000111000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

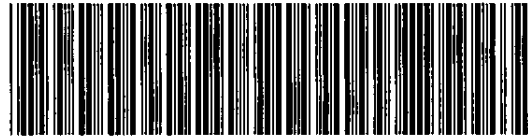
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

12 OCT -9 AM 8:37

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SWEET BAKES, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L10000111000

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:

Salvador Frazzetta

Name of Person

Bringabout Inc

Name of Firm/Company

6205 Blue Lagoon Dr Ste 130

Address

Miami FL 33126

City/State and Zip Code

info@bringabout.us

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

For further information concerning this matter, please call:

Salvador Frazzetta

Name of Person

at (305) 655-1589

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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TALLAHASSEE, FLORIDA

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,

Bringabout Inc

Name of Registered Agent

, hereby resigns

Registered Agent for

SWEET BAKES, LLC

Name of Limited Liability Company

L10000111000

Document Number, if known

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SECRETARY OF STATE

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.


Signature of Resigning Agent

If signing on behalf of an entity:

Salvador Frazzetta, Bringabout Inc

Typed or Printed Name

Vice President

Capacity

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