

L11 000000 9822

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RPK Yoga, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L11000009822

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:

Paula K. Albertson  
Name of Person

RPK Yoga, Inc.  
Name of Firm/Company

11954 Boyette Road  
Address

Riverview, FL 33569  
City/State and Zip Code

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

For further information concerning this matter, please call:

Paula K. Albertson at ( 813 ) 707-0892  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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2013 MAY -6 PM 2:01  
SECRETARY OF STATE  
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,

Katherine Cannon

Name of Registered Agent

, hereby resigns as

Registered Agent for RPK Yoga, LLC

Name of Limited Liability Company

L11000009822

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.

Katherine Cannon

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

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2008 MAY -6 PM 2:01  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

### **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withdrawn limited liability company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