

L11000020038

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TALLAHASSEE, FLORIDA

B. BOSTICK
AUG 20 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: One Up Distributors, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L11000020038

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:

Shamsha A Lakhani

Name of Person

One Up Distributors, LLC

Name of Firm/Company

9132 Wickham Way,

Address

Orlando, FL 32836

City/State and Zip Code

oneupdistributors@gmail.com

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

For further information concerning this matter, please call:

Shamsha A Lakhani at (407) 619-7044

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Shamsha A Lakhani

, hereby resigns as

Name of Registered Agent

Registered Agent for **One Up Distributors, LLC**

Name of Limited Liability Company

L11000020038

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.

Shamsha A Lakhani

Signature of Resigning Agent

If signing on behalf of an entity:

M

SA

Typed or Printed Name

Capacity

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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withdrawn limited liability company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

Shamsha A Lakhani

One Up Distributors, LLC

9132 Wickham Way,

Orlando, FL 32836

Date: January 1, 2013

Ref: Resignation.

To whom so ever concerned.

This is to inform that I Shamsha A Lakhani, Registered Agent of One Up Distributors, LLC have resigned from One Up Distributors, LLC effective January, 1 2013.

Any question, please call me at (407) 619-7044.

Sincerely,



Shamsha A Lakhani

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