

**L11 0000061758**

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**T. CLINE**  
JAN 12 2012  
**EXAMINER**

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Gotta Have It Clothing, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L11000061758

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:

Hamid Toutounchian  
Name of Person

Name of Firm/Company

1984 Teague Street  
Address

South Daytona Beach, Florida 32119  
City/State and Zip Code

reza32174@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dace Kamaly at ( 386 ) 882-5505  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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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## 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,

TBW Group, Inc., hereby resigns as  
Name of Registered Agent

Registered Agent for Gotta Have It Clothing, LLC  
Name of Limited Liability Company

L11000061758  
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.

Mary J. Ward for TBW Group, Inc.  
Signature of Resigning Agent

If signing on behalf of an entity:

Mary Ward for TBW Group, Inc.  
Typed or Printed Name  
Registered Agent  
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

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