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SECRETARY 65 SEVE BIVENERY OF COMPORATIONS

JAN = 8 2013 T. HAMPTOR

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: P.L.P Investment Group, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L11000123420

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:

Pedro Pacheco

Name of Person

P.L.P Investment Group, LLC

Name of Firm/Company

P.O. BOX 127479

Address

HIALEAH, FL 33012

City/State and Zip Code

plpmartinez@gmail.com

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

For further information concerning this matter, please call:

Dayami Espinosa

 $_{\rm at}$ 305 $^{\circ}$

924-3443

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



RECEIVED

13 JAN -7 PM 4:00

FLORIDA DEPARTMENT OF STATE Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FLORIDA

December 14, 2012

PEDRO PACHECO PLP INVESTMENT GROUP LLC P O BOX 127479 HIALEAH, FL 33012

SUBJECT: P.L.P INVESTMENT GROUP, LLC.

Ref. Number: L11000123420

We have received your document for P.L.P INVESTMENT GROUP, LLC. and check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$60.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist II

Letter Number: 812A00029598

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,
Dayami Espinosa	, hereby resigns as
Name of Registered Ager	
Registered Agent for PL.P INVESTM	MENT GROUP, LLC
Name of Lim	nited Liability Company
L11000123420	
Document Number, if known	
A copy of this resignation was mailed to the a	above listed limited liability company at its last known address.
The agency is terminated and the office disco	ontinued on the 31st day after the date on which this statement is filed. Signature of Resigning Agent
If signing on behalf of an entity:	
<u>DAYM</u>	Syped or Printed Name
	Capacity
FILING \$ 85.00 \$ 25.00	FEES: Active limited liability company 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