

(Re	equestor's Name)	_
(Ad	Idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

G. MCEEOD'S
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EXAMINER



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12 SEP -7 PM 1: 25
SECRETARY OF STATE
ALLAHASSEE, FLORID,

12 SEP -7 PH 1: 2

BERKOWITZ & ASSOCIATES, P.A.

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OF COUNSEL

MAURICE BERKOWITZ

ALSO ADMITTED NEW YORK BAR

DAVID J. BERKOWITZ

September 5, 2012

VIA OVERNIGHT MAIL

Fictitious Name Registration Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: GOOD TO GO GANG, LLC

Dear Sir/Madam:

Enclosed herewith are two resignations regarding the above referenced entity; one is for managing member and the other is for registered agent. Also enclosed are two checks; one in the amount of \$85.00 and the other in the amount of \$55.00 which includes the Certified Copy Fee of for the resignation of the managing member. Please return the Certified Copy at your earliest convenience in the self-addressed stamped envelope provided. Should you have any questions regarding this matter, please do not hesitate to contact this office.

Very truly yours,

BERKOWITZ & ASSOCIATES, P.A.

Ian M. Berkowitz, Esq.

.cc Client

Enclosures as noted

COVER LETTER

Division of Corporations	
SUBJECT: Good To Go Gang, LLC	
(Name of Limited	d Liability Company)
The enclosed member, managing member or mailing.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
lan M. Berkowitz, Esq.	
(Contact Person)	
Berkowitz & Associates, P.A.	
(Firm/Company)	
2101 NW Corporate Boulevard, Su	uite 107
(Address)	
Boca Raton, Florida 33431	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
lan M. Berkowitz, Esq.	982-7800
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	the Florida Department of State for:
\$25 Filing Fee	√ \$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
i ananassee, fiorida 32301	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the of State is: Go	limited liability company as od To Go Gang, LLC	s it appears on the records of the	he Florida Department
2. This limited liab Florida	ility company was organized	i under the laws of:	
3. The Florida doct L1100013	_	f this limited liability company	y is:
	lame of Person Resigning) bility company and affirm th	, hereby resign as a Ma	
Signature of Resi	gning Member, Managing N \$25.00 (Required) \$30.00 (Optional)	∕lember or Manager	12 SEP -7 PM I: SECRETARY OF STIALLAHASSEE, FLO