

LI2000029279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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04/10/17--01020--013 **25.00

04/03/18--01007--004 **60.00

2010 MAR 30 P 4: 26
CLERK OF COURT
TALLAHASSEE, FLORIDA

FILED

4/4/18 DS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 19, 2017

JAMES A BOATMAN JR
3021 AIRPORT PULLING RD N STATE 202
NAPLES, FL 34105

SUBJECT: SIMPLE BEAUTY STUDIO LLC
Ref. Number: L12000029279

We have received your document for SIMPLE BEAUTY STUDIO LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

There is a balance due of \$60.00.

Please return your document, along with 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.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 117A00025654

RECEIVED
MAR 30 2018

FILED
2018 MAR 30 P 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Simple Beauty Studio, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L12000029279

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:

James A. Boatman, Jr.

Name of Person

The Boatman Law Firm, P.A.

Name of Firm/Company

3021 Airport Pulling Rd. N. Ste. 202

Address

Naples, FL 34105

City/State and Zip Code

hairbykileya@gmail.com

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

For further information concerning this matter, please call:

Kiley Abazi at (239) 331-1024

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

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

FILED
2018 MAR 30 P 4: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

The Boatman Law Firm, P.A., hereby resigns as
Name of Registered Agent

Registered Agent for Simple Beauty Studio, LLC

Name of Limited Liability Company

L12000029279

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.

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

~~Agent of~~ The Boatman Law Firm, P.A.
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

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2018 MAR 30 P 4: 26

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