

L120000 79692

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(Address)

(City/State/Zip/Phone #)

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Shirley M. Smith
FBI - CHICAGO

SEP 10 2013

TECHNOLOGY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WE GOT YOU LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L12000079692

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:

TIFFAY GONZALEZ

Name of Person

ACCOUNTING TO SCALE

Name of Firm/Company

8055 CORAL WAY

Address

MIAMI, FL 33155

City/State and Zip Code

Luiz@wgylifestyle.com

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

For further information concerning this matter, please call:

TIFFANY GONZALEZ

at (786) 942.9327

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

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

ACCOUNTING TO SCALE

_____, hereby resigns as
Name of Registered Agent

Registered Agent for **WE GOT YOU LLC**

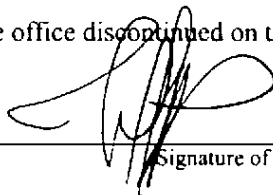
Name of Limited Liability Company

L12000079692

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:

TIFFANY GONZALEZ

Typed or Printed Name

CEO

Capacity

FILED
19 OCT -2 AM 8:48
SHIRLEY A. JONES, CLERK
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**