

L120000142615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

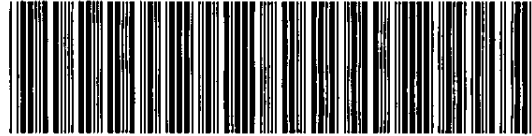
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600271430016

04/09/15--01013--003 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2015 APR 21 AM 8:16

Res/mgkm
@ 4.21.15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MYNKA LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Douglas Garcia

(Contact Person)

(Firm/Company)

18604 NE 18th Ave Apt 251

(Address)

Miami, Florida 33179

(City/State and Zip Code)

For further information concerning this matter, please call:

Douglas Garcia

at (786) 277 - 4171

(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:

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

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2015

DAOUGLAS GARCIA
18604 NE 18TH AVE
APT. 251
MIAMI, FL 33179

SUBJECT: MYNKA LLC
Ref. Number: L12000142615

We have received your document for MYNKA 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):

The document must have original signatures.

You failed to sign the form.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 615A00007218

RECEIVED

15 APR 21 PM 1:47

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2015 APR 21 AM 8:16

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: MYNKA LLC

2. The Florida document/registration number assigned to this limited liability company is:
L12000142615

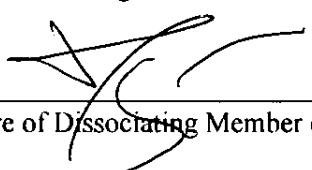
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4/6/2015

4. I, Douglas Garcia, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGRM

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.



Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)