

#L/130000/1852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

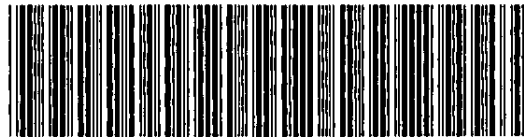
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/06/13--01036--003 **25.00

FILED
13 MAY 16 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAY 16 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 7, 2013

DANIEL GRACIA
501 N ORLANDO AVE.
SUITE 331, PMB221
WINTER PARK, FL 32789

SUBJECT: HIVE CONCEPTS LLC
Ref. Number: L13000011852

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 013A00011162

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hive Concepts LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

Daniel Gracia
(Contact Person)

(Firm/Company)

501 N Orlando Ave Suite 313 PMB 221
(Address)

Winter Park FL 32789
(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel Gracia at (407) 489-6966
(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 CORPORATIONSFILED
13 MAY 16 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

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

2. This limited liability company was organized under the laws of:


Florida

3. The Florida document/registration number of this limited liability company is:

L13000011852

4. I, Daniel Gracia, hereby resign as a DIR
(Print Name of Person Resigning) (Print Title)

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


Signature of Resigning Member, Managing Member or Manager

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