

L13000054377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

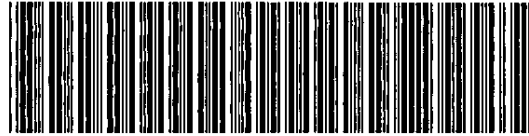
(Business Entity Name)

(Document Number)

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APR 07 2017

J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ECIG SHOP MIAMI LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L13000054377

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:

MAJID WAYNE  
Name of Person

ECIG SHOP MIAMI LLC  
Name of Firm/Company

10370 SW 37 ST  
Address

MIAMI, FL 33165  
City/State and Zip Code

majidwayne@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAJID WAYNE at ( 305 ) 726-8607  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 24, 2017

MAJID WAYNE  
10370 SW 37 ST  
MIAMI, FL 33165

SUBJECT: ECIG SHOP MIAMI LLC  
Ref. Number: L13000054377

We have received your document for ECIG SHOP MIAMI LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

An individual must sign on behalf of the entity resigning as the registered agent.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 617A00005665

2017 APR -4 PM 2:18  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
17 APR -4 AM 11:26  
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,

INCORP SERVICES INC., hereby resigns as  
Name of Registered Agent

Registered Agent for ECIG STOP MIAMI LLC  
Name of Limited Liability Company

L13000054377  
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.

Masid Wayne  
Signature of Resigning Agent

If signing on behalf of an entity:

MASID WAYNE  
Typed or Printed Name  
MGR. of ECIG STOP MIAMI LLC  
Capacity

17 APR -4 AM 11:26

FILED  
SECRETARY OF STATE  
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