

L140000 36191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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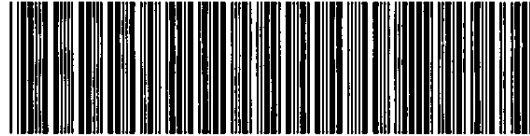
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# **II HARPER MEYER II**

Attorneys at Law

PATRICK J. O'CONNOR  
pjocconnor@harpermeyer.com  
Telephone: (305) 577-3443

October 27, 2015

**Sent via Certified Mail-RRR 7014 1820 0001 3111 4060**

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

Re: Fashion Tots, LLC  
Document No: L14000036191  
Resignation of Registered Agent

Dear Sir or Madam:

Enclosed please find the Resignation of Registered Agent for the Limited Liability Company.  
Fashion Tots, LLC along with our check number 508 in the amount of \$25.00.

If you should have any questions, please feel free to contact our office.

Very Truly Yours,

**HARPER MEYER PEREZ HAGEN  
O'CONNOR ALBERT & DRIBIN, LLP**

/s/ Patrick J. O'Connor  
Patrick J. O'Connor, Esquire

Enclosures

**HARPER MEYER PEREZ HAGEN O'CONNOR ALBERT & DRIBIN LLP**

Suite 800 • 201 S. Biscayne Boulevard • Miami, Florida 33131

Telephone: 305.577.3443 • Facsimile: 305.577.9921 • Web site: [www.harpermeyer.com](http://www.harpermeyer.com)

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FASHION TOTS, LLC

Name of Limited Liability Company

**DOCUMENT NUMBER:** L14000036191

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:

PATRICK J. O'CONNOR, ESQ.

Name of Person

LAW CENTER OF THE AMERICAS, LLC

Name of Firm/Company

201 S. BISCAYNE BLVD. SUITE 800

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

pjoconnor@harpermeyer.com

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

For further information concerning this matter, please call:

PATRICIA M. O'CONNOR, ESQ.

Name of Person

at ( 305 ) 577-3443

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

LAW CENTER OF THE AMERICAS, LLC

Name of Registered Agent

, hereby resigns as

Registered Agent for FASHION TOTS, LLC

Name of Limited Liability Company

L14000036191

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:

PATRICK J. O'CONNOR, ESQ.

Typed or Printed Name

INCORPORATOR

Capacity

FILED  
2015 NOV 23 AM 11:12  
DEPARTMENT 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