# 414000068282

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### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: 2 GUYS Liquors CC  Name of Limited Liability Company	<del>-</del>
DOCUMENT NUMBER: 4 14 0000 68 282	_
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee for filing.	are submitted
Please return all correspondence concerning this matter to the following:	
VALENTIO BEJAN	
Name of Person	
Name of Firm/Company	
18611 5W 24 5T. Address	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	
Name of Person at (305) 972-8574  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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

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known address	s.
this statement	is filed.
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Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company