

L14000165483

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT RESIGNATION
GINLA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$85.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 FEB 14 AM 9:33

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

eResidentAgent, Inc.

, hereby resigns as

Name of Registered Agent

Registered Agent for

GINLA, LLC

Name of Limited Liability Company

L14000165483

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:

Erika Easter

Typed or Printed Name

Authorized Person

Capacity

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withdrawn limited liability company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

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19 FEB 14 AM 9:40
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TALLAHASSEE, FLORIDA