

L15000015298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

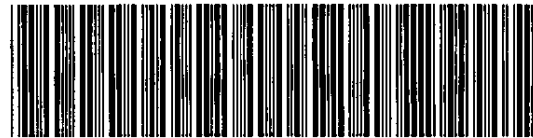
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2016

NATALIA KABANOVA
2803 N OAKLAND FOREST DR, 307
OAKLAND PARK, FL 33309

SUBJECT: ASSET MANAGEMENT SERVICES GROUP, LLC
Ref. Number: L15000015298

We have received your document for ASSET MANAGEMENT SERVICES GROUP, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 116A00020292

COVER LETTER

TO: Registration Section
Division of Corporations

90

SUBJECT: Asset Management Services Group, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L15000015298

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:

Natalia Kabanova

Name of Person

Name of Firm/Company

2803 N Oakland Forest Dr, 307

Address

Oakland Park, FL 33309

City/State and Zip Code

natalia.kabanova@outlook.com

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

For further information concerning this matter, please call:

Natalia Kabanova

Name of Person

at (954) 5156170

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Natalia Kabanova

Name of Registered Agent

, hereby resigns as

Registered Agent for Asset Management Services Group, LLC


Name of Limited Liability Company

L15000015298

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:

Typed or Printed Name

Capacity

16 SEP 28 AM 7:58
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