# 115000031906

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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February 22, 2017

ROGERIO FRUG 16485 COLLINS AVE APT 2134 SUNNY ISLES BEACH, FL 33160

SUBJECT: NOYOI ENTERPRISES LLC

Ref. Number: L15000021906

We have received your document for NOYOI ENTERPRISES 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 LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(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.

Octavia I Simmons Regulatory Specialist II

Letter Number: 217A00003444

2017 MAR - 7 AM ID: 52

### **COVER LETTER**

SUBJECT: NO YOI ENTER PRISES LLC Name of Limited Liability Company
Name of Limited Liability Company
DOCUMENT NUMBER: L 15 0000 2 1 9 0 6
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:
TANETE MINKOVES  Name of Person
Name of Firm/Company  16485 COLLINS AVE # 2/34  Address
16485 COLLINS AVE # 2134
Address
SUNNY ISLES BEACH, FL 33160 City/State and Zip Code
FRUG & YRT. COM. BR  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TAVETTE MINKOVES at 305 331-42/3 Name of Person Area Code Daytime Telephone Number
Thea Coad Baytine Perspicie Pullings
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

**TO:** Registration Section Division of Corporations

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

Pursuant to the provisions			the undersigned	d <b>,</b>	
JANET	TE M	LINKOVES	, herel	y resigns as	
	Name of Registered Age		,	, ,	
Registered Agent for	NOYOI	ENTER	PRISES	LLC	<del></del>
	Name of Lit	mited Liability Company			,
L 150000 -					
Document Num	ber, ii known				
A copy of this resignation	was mailed to the	above listed limited	liability compa	ny at its last kno	own address.
The agency is terminated	and the office disc	ontinued on the 31st	day after the d	ate on which this	s statement is filed.
-		Signature of Resignir	ng Agent	>	
If signing on behalf of an	entity:				17 HAR -7
-		Typed or Printed Name			is a second second
-		Capacity			PH 2: 29

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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