

L150000 82809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

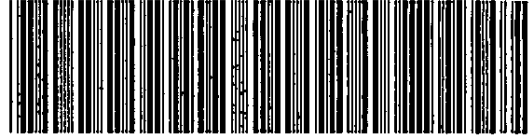
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600285306936

07/26/16--01046--002 \*\*60.00

05/06/16--01027--029 \*\*25.00

FILED  
16 JUL 25 PM 12:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 26 2016  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Remove my name from Hemp Genx LLC affiliation.

\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L15000082809

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:

Raphael Colon

\_\_\_\_\_  
Name of Person

CanoCreative LLC

\_\_\_\_\_  
Name of Firm/Company

10189 SW 49th Manor

\_\_\_\_\_  
Address

Cooper City, FL 33328

\_\_\_\_\_  
City/State and Zip Code

canocreative@gmail.com

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

For further information concerning this matter, please call:

Raphael Colon

at ( 954 ) 709-1502

\_\_\_\_\_  
Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 9, 2016

RAPHAEL COLON  
10189 SW 49TH MANOR  
COOPER CITY, FL 33328

SUBJECT: HEMP GENX LLC  
Ref. Number: L15000082809

16 JUL 25 PM 12:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for HEMP GENX LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$60.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 516A00009725

2016 JUL 25 PM 3:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

Raphael Colon

, hereby resigns as

Name of Registered Agent

Registered Agent for Hemp Genx LLC

Name of Limited Liability Company

L15000082809

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.

Raphael Colon (RC)

Signature of Resigning Agent

If signing on behalf of an entity:

Raphael A. Colon

Typed or Printed Name

AMBR

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

FILED  
16 JUL 25 PM 12:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA