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(Cit	y/State/Zip/Phono	e #)
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SECRETARY OF STATE

D. SCOTT MAY 1 7 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 5, 2017

ROBERT A STOK 18851 NE 29TH AVE AVENTURA, FL 33180

SUBJECT: F AND V GROUP HOLDINGS LLC

Ref. Number: L15000093246

We have received your document for F AND V GROUP HOLDINGS LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Registered Agent listed on application doesn't match sunbiz.org records.

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.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 817A00006537

COVER LETTER

Registration Section Division of Corporations **DOCUMENT NUMBER:** 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: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company. liability company. **MAILING ADDRESS:** STREET ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

TO:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned, Stok, Robert A., ESQ, hereby resigns as Name of Registered Agent		
Registered Agent for Fand V Group Holdings	UC	、 ノ 、
Name of Limited Liability Company		
L1500093246 Document Number, if known A copy of this resignation was mailed to the above listed limited liability company at its last known	n address	
The agency is terminated and the office discontinued on the 31st day after the date on which this st		filed
If signing on behalf of an entity:	A S	
Typed or Printed Name	RETA	FI
Capacity	75年3	ILED
FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company	17.133 17.133	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314