

L17000076753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

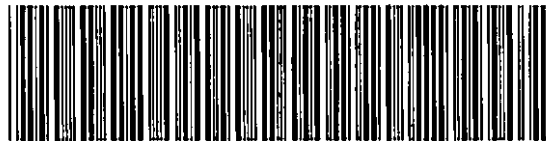
(Business Entity Name)

(Document Number)

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2019 MAR 26 P 7:01
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4/8/19 DS

MARINA BENTATA SKORNICKI, P.A.

20700 WEST DIXIE HIGHWAY
AVENTURA, FLORIDA 33180

MARINA BENTATA SKORNICKI, ESQ.

TELEPHONE (305) 335-9821
E-MAIL MBENTATAS@GMAIL.COM

March 25th, 2019

PERSONAL AND CONFIDENTIAL

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Bobby Pins Investments, LLC
Document number: L17000076753

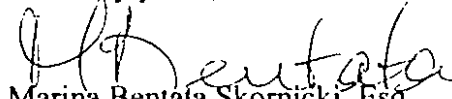
Dear Sir/Madam,

I am legal counsel for Bobby Pins Investments, LLC, a Florida limited liability company.
Enclosed please find the following documents:

1. Cover Letter and original Statement of Resignation of Registered Agent duly signed.
2. Cover Letter and original Statement of Change of Registered Agent duly signed.
3. Check of this firm in the amount of Fifty Dollars and 00/100 cents (\$50.00).

Please process accordingly.

Sincerely yours,


Marina Bentata Skornicki, Esq.

Cc: Moises Knafo

FILED
2019 MAR 26 PM 7:01
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bobby Pins Investments, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L17000076753

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:

Marina Bentata Skornicki, Esq.

Name of Person

Marina Bentata Skornicki, P.A.

Name of Firm/Company

20700 West Dixie Highway

Address

Aventura, Florida 33180

City/State and Zip Code

mbentatas@gmail.com

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

For further information concerning this matter, please call:

Marina Bentata Skornicki, Esq.

at

305

335-9821

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

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2019 MAR 26 P 7:01
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,

Howard B. Nadel, P.A., hereby resigns as
Name of Registered Agent

Registered Agent for BOBBY PINS INVESTMENTS, LLC

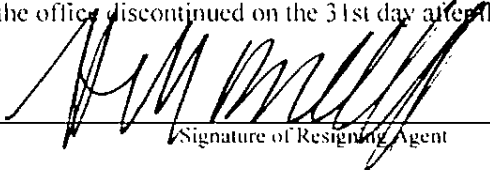
Name of Limited Liability Company

L17000076753

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:

HOWARD B. NADEL

Typed or Printed Name

President

Capacity

FILED
2019 MAR 26 P 7:01
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