L1800078384

(Requ	iestor's Name)	
(Addr	ess)	
(Address)		
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Docu	ment Number)
Certified Copies	Certificate	s of Status
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D. SCOTT MAY 1 0 2013

COVER LETTER

Division of Corporations		
SUBJECT: NUFF - MIXX-UP Smoothic Name of Limited Liability Company DOCUMENT NUMBER: 18000078384	Bar	
The enclosed Resignation of Registered Agent for a Limited Liability Company ar for filing.	nd fee are sub	mitted
Please return all correspondence concerning this matter to the following:		
Elvia L. Holloway Name of Person	•	,
NUFF- MIXX-UP Smoothie Bar Name of Firm/Company	and .	
437 25th Street 1	SAL MAN	E SERVICE
West Palm Beach H 33407 City/State and Zip Code	SSEE TO	
E-mail address: (to be used for fulfre annual report notification)	9 5 L	
For further information concerning this matter, please call:		
Elvia Holloway at (401) 692-3015	5	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2018

ELVIA L HOLLOWAY 437 25TH ST WEST PALM BEACH, FL 33407

SUBJECT: NUFF-MIXX-UP SMOOTHIE BAR, LLC

Ref. Number: L18000078384

We have received your document for NUFF-MIXX-UP SMOOTHIE BAR, 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):

No document enclosed.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 618A00006978

RECEIVED
2018 MAY - 7 PM 1:38
DEPARTMENT OF STATE
DIVISION OF CORPORATION

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,
Elvia L. Melville Holloway, hereby resigns as
Registered Agent for NUFF-MIXX-UP-Smoothie Bal
NUFF- MIXX-UP-Smoothie Bar LLC
Name of Limited Liability Company
L18000078384
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.
Elica Melecial Hollowood Signature of Resigning Agent
If signing on behalf of an entity:
Elvia 1. Melville Hollowary Typed or Printed Name
C S C
Capacity
FILING FEES: \$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/

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

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company