

L22 000 233/91

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

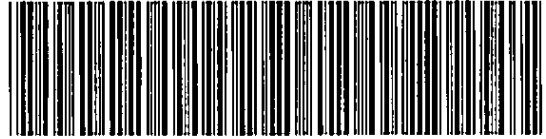
(Business Entity Name)

(Document Number)

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

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Office Use Only



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A. RIVERS

MAR - 6 2023

FILED  
2022 DEC 19 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

In Joy LLC

**SUBJECT:** \_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Natalia Londono

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

In Joy LLC

\_\_\_\_\_  
Firm/Company

5351 SW 140th Court

\_\_\_\_\_  
Address

Miami, Florida 33175

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

info@injoy-events.com

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

For further information concerning this matter, please call:

Natalia Londono

786

608-7795

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

at (\_\_\_\_\_) \_\_\_\_\_

Area Code & Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department  
In Joy LLC  
of State is: \_\_\_\_\_

2. The Florida document/registration number assigned to this limited liability company is:  
88-2586735  
\_\_\_\_\_

3. The date this member/manager withdrew/resigned or will withdraw/resign is: \_\_\_\_\_  
Diana Ocampo  
Nov 19, 2022

4. I, Diana Ocampo, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Member  
Managing Partner  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my  
resignation in writing.

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)