## F93000003635

(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:	





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2015 APR 17 AM 9: 40
SECRETARY OF STATE

C. CARROTHERS



Corporate Office 1701 Directors Blvd. Suite 300 Austin, TX 78744

(888) 705-7274 Phone (888) 706-7274 Fax www.rasi.com Web

April 10, 2015

Florida Secretary of State Amendment Section Corporations Division P.O. Box 6327 Tallahassee, FL 32314

RE:

**Entity Resignations** 

To Whom It May Concern:

Registered Agent Solutions, Inc. hereby resigns as registered agent for the attached entities. Written notice of resignation was given to the attached entities by delivering such notice to the entities at their last known addresses. Enclosed please find the following for filing with the Florida Secretary of State:

- One original and one copy of the Resignation of Registered Agent statement.
- \$35.00 Filing fee for Inactive or \$87.50 for Active company

Please file immediately the enclosed, and return a file-stamped copy of each resignation to the undersigned. If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Sincerely,

Amber Millsapps

Client Services Representative Registered Agent Solutions, Inc.

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	JECT: GFI MORTGAGE BANKERS, INC. (Name of Corporation)
DOC	UMENT NUMBER: F93000003635
	enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
	e return all correspondence concerning this matter to the following:
Amb	per Millsapps
·— ·	(Name of Person)
Reg	jistered Agent Solutions, Inc.
	(Name of Firm/Company)
170	1 Directors Blvd Ste. 300
	(Address)
Aus	tin, TX 78744
	(City/State and Zip Code)
For fu	urther information concerning this matter, please call:
Amb	oer Millsapps at ( 888 ) 705-7274  (Name of Person) at ( Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

## 2015 APR 17 AM 9: 4

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Registered Agent Solutions, Inc.  (Name of Registered Agent)
hereby resigns as Registered Agent for GFI MORTGAGE BANKERS, INC.
F9300003635
(Document Number, if known)  A copy of this resignation was mailed to the above listed corporation at its last known address of the second sec
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:
Jaclyn Wright  (Typed or Printed Name)
(Typed of Trinced Name)
Assistant Secretary
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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