L03000020921

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SECRETARY OF STATE
DIVISION OF CORPCRATIONS
OF NOV 15 AM 9: 22

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CB-Tech USA, LLC (Name of Limited Liability Company)
DOCUMENT NUMBER: L03000020921
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:
Mary Jo Spalinger (Name of Person)
Business Filings Incorporated
(Name of Firm/Company)
8025 Excelsior Drive #200
(Address)
Madison, WI 53717
(City/State and Zip Code)
For further information concerning this matter, please call:
same at (608 827-5300 (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 608.416(2) or 608.	509, Florida Statutes, the undersigned,		
Business Filings	Incorporated	, hereby resigns as		
	(Name of Registered Agent)	,,,,,		
Registered Agent for	CB-Tech USA, LLC			_
	(Name of Limited Liabilit	y Company)		_
L03000020921				
(Document Nu	umber, if known)			
A copy of this resigna	tion was mailed to the above listed	l limited liability company at its last know	wn address	3.
The agency is termina	ted and the office discontinued on	the 31st day after the date on which this	statement	is filed.
	Mary Signature of Resignature	Cerce Centing Agent)		<u>=</u>
If signing on behalf of	an entity:		05 NOV	SEC
	Mary Jo Spalinger		N -	무구기
	(Typed or Print	red Name)	5	375
	Assistant Secretary		至	중유미
	(Capacity)		9: 23	RATION

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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