11000059419

(Requestor's Name)			
1005. Ashley Dr.			
(Address)			
"Ste 400			
(Address)			
Tampa, Fl. 33608 (City/State/Zip/Phone #)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Basiness Entry Hame)			
(Document Number)			
Certified Copies Certificates of Status			
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12/07/12--01007--019 **435.00

2012 DEC -7 AN II: 59
SECRETARY OF STATE

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of sec	tion 608.416(2) or 608.509, Florida Statutes, the	the undersigned,	
CF	FRA, LLC	reby resigns as	
	Registered Agent		٠
Registered Agent for	FINESSE DISTRIBUTORS	S LLC	
	N Cl	,	
	Name of Limited Liability Company		
L1100005941	9		
Document Number, if k	nown		
A copy of this resignation was n	nailed to the above listed limited liability comp	pany at its last known address.	
The agency is terminated and th	e office discontinued on the 31st day after the 31st day after the 31st day after the 31st day after the 31st day	date on which this statement is filed.	
If signing on behalf of an entity:	\mathcal{O}		
	Joyce F. Bentubo Typed or Printed Name	PI DECRET	.47%
	Capacity	TARY OF ST HASSEE, FLO	Į.

FILING FEES: \$ 85.00 Activ \$ 25.00 Admi

Active limited liability company
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withdrawn limited liability company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

INHS17 (08/05)