Division of Corporations

Page 1 of 2

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023

: (850)205-8842

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	
		_

LLC REGISTERED AGENT RESIGNATION CREATIVE RECYCLING SYSTEMS OF NORTH FLORIDA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

MAY 3 1 2016

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: CREATIVE RECYCLING SYSTEM						
DOCUMENT NUMBER: L12000032481	ted Liability Company					
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.						
Please return all correspondence concerning this n	matter to the following:					
Theresa Alfieri						
Name of Person						
NRAI SERVICES, INC.						
Name of Firm/Company						
111 8th Avenue, 13th Floor						
Address	······					
New York, New York 10011						
City/State and Zip Code						
theresa.alfieri@wolterskluwer.com						
E-mail address: (to be used for future annual report not	otification)					
For further information concerning this matter, ple	lease call:					
Theresa Alfieri	212 894-8516					
	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 605.0115, Florida Statutes, the und	ersigned,
NRAI SERVICES	, INC.	_, hereby resigns as
	Name of Registered Agent	
Registered Agent for	CREATIVE RECYCLING SYSTEMS OF	NORTH FLORIDA, LLC
· · · · · · · · · · · · · · · · · · ·	Name of Limited Liability Company	
L12000032481		
Document l	Number, if known	
A copy of this resignat	tion was mailed to the above listed limited liability	company at its last known address.
The agency is terminal	ted and the office discontinued on the 31st day after	er the date on which this statement is filed.
	Melly Signature of Resigning Agent	EXT EXT
	Signature of Resigning Agent	
If signing on behalf of		AN 2
	NRAI Services, Inc Theresa Alfieri	To M
	Typed or Printed Name	S.S.
	Assistant Secretary	8: 5)
	Capacity	

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

INHS17 (2/14)