6/29/2017

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H17000171934 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (512)418-6949 Phone : (954)208-0845 Fax Number

**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 RWB FINANCIAL, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

S. WARREN

JUN 3 0 2017

TO: Registration Section

COVER LETTER

Division of Corporations			
SUBJECT: RWB Financial, LLC Name of Lin			
Name of Lir	nited Liability	Company	
DOCUMENT NUMBER: M00000001308			
The enclosed Resignation of Registered Agent for filing.	for a Limited	Liability Company and fee are submitted	
Please return all correspondence concerning th	is matter to th	ne following:	
Kate Seidita			
Name of Person		•	
C T CORPORATION SYSTEM			
Name of Firm/Company			
111 8th Avenue, 13th Floor			
Address			
New York, New York 10011			
City/State and Zip Code			
kate.seidita@wolterskluwer.com			
E-mail address: (to be used for future annual repor	t notification)		
For further information concerning this matter,	please call:		
Kate Seidita a	, 212	894-8526	
Name of Person	Aren Code	Daytime Telephone Number	
Enclosed is a check made payable to the Florid liability company or \$25.00 for an administrati liability company.	a Departmen vely dissolve	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limited	
MAILING ADDRESS:	STREI	ET ADDRESS:	
Registration Section	Registration Section		
Division of Corporations	Division of Corporations Clifton Building		
P.O. Box 6327 Tallahassec, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

C T CORPORATION SYSTEM			, hereby resigns as	
Name of Registered Agent				
Registered Agent for	RWB Financial, Li	LC		
	Name of Li	imited Lizbility Company		
M00000001308				
Document I	Sumber, if known			
A copy of this resignat	ion was mailed to the	above listed limited liabilit	y company at its last known address.	
	1131	Signature of Resigning Agent		
f signing on behalf of	an entity:			
	C T Corporation	n System - Kate Seidita	ì	
	Typed or Printed Name			
	Assistant Secretary			
		Capacity		
	<u>FILING</u> \$ 85.00	FEES: Active limited liability of	ompany cd/ voluntarily dissolved/	
	\$ 25.00	withdrawn limited liabi	ed/ voluntarily dissolved/ ity company	

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

INHS17 (2/14)

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