

MD4000002889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

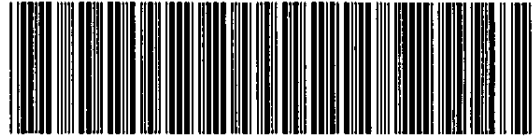
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 21, 2015

ROSS W RELLES
1900 POINT WEST WAY #224
SACRAMENTO, CA 95819

SUBJECT: THE RELLES, LLC
Ref. Number: M04000002889

RECEIVED
15 MAY -6 AM 10:00
BUREAU OF COMMERCIAL
INFORMATION SERVICES

We have received your document for THE RELLES, LLC and your check(s) totaling \$. However, the document has not been filed and is being retained in this office for the following:

The check submitted must be made payable to the Florida Department of State.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 315A00008010

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OFFICE OF THE
CLERK OF THE
FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ross w Relles Insurance Services Inc
(Name of Foreign Limited Liability Company)
the Relles LLC

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ross w Relles
(Name of Person)

the Relles Company
(Firm/Company)

1900 - Point West Way #22K
(Address)

SACRAMENTO, CA 95819
(City/State and Zip Code)

For further information concerning this matter, please call:

Ross w. Relles at (916) 923-4600
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☒ \$60 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA
CLERK OF STATE

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY


Ross W Rettes Insurance Services Inc
(Name of limited liability company)

(Jurisdiction of its organization)

(Date registered with Florida Department of State)

M04000002889
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.


(Signature of authorized representative)

Ross W. Rettes
(Typed or printed name of signee)

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CLERK OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$25.00