

8/21/2018

Division of Corporations

Florida Department of State
Division of Corporations
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Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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LLC REGISTERED AGENT RESIGNATION
WILDER/BN PARCEL D LLC

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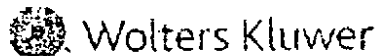
TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Ranae McGraw
DATE	2018-08-21 11:54:18 CST
RE	WILDER/BN PARCEL D LLC

COVER MESSAGE

Thank You,

Aubrey Weibel
Fulfillment Specialist
CT Corporation

Team (614) 280-3338
GlobalFulfillmentTeam@wolterskluwer.com



1209 N Orange Street
Wilmington, DE 19801
www.wolterskluwer.com

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

NRAI SERVICES, INC.

Name of Registered Agent

, hereby resigns as

Registered Agent for WILDER/BN PARCEL D LLC

Name of Limited Liability Company

M06000001795

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

Kristin Bolden

Assistant Secretary

Typed or Printed Name

Capacity

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\$25.00	Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company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