

M09000002958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

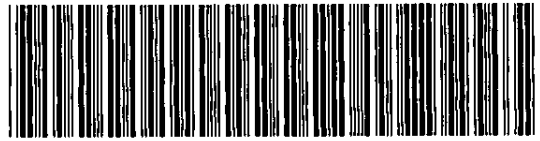
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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BRUCE
FEB 16 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Arch Bay Mortgage, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: M09000002958

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mike Mirrione
Name of Person

Wolz Corporate USA
Name of Firm/Company

36 S 18th Ave., Suite D
Address

Brighton, CO 80206
City/State and Zip Code

mike@wolzcorporate.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike Mirrione at (303) 655.9659
Name of Person Area Code Daytime Telephone Number.

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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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

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

Incorp Services, Inc.

, hereby resigns as

Name of Registered Agent

Registered Agent for Arch Bay Mortgage, LLC

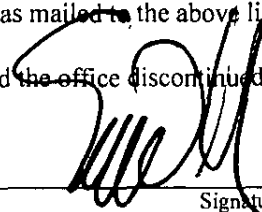
Name of Limited Liability Company

M09000002958

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:

Eric Wolz

Typed or Printed Name

Assistant Secretary

Capacity

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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