M12000000155

(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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022 DEC -5 ATTO: 3

RECEIVED 2022 DEC -6 AM II: 54 PALLAHASSEE FLORIG

A. BUTLER
DEC - 7 2022

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbasses EL 32201

Tallhassee, FL 32301 Phone: 850-558-1500

rnone. 650 550 1500				
ACCOUNT NO. : I2000000195				
REFERENCE : 412019 8323810				
AUTHORIZATION :				
COST LIMIT : \$25 lookena				
ORDER DATE : January 18, 2022				
ORDER TIME : 9:31 AM				
ORDER NO. : 412019-020				
CUSTOMER NO: 8323810				
RESIGNATION OF AGENT				
NAME: GLOBAL INDEPENDENT ADVISORS, L LC				
XX RESIGNATION OF AGENT				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Eyliena Baker-EXT#				
EXAMINER'S INITIALS:				

COVER LETTER

TO: Registration Section Division of Corporations		
GLOBAL INDEPENDENT ADVISOR SUBJECT:	RS, LLC	
Name of L	Limited Liability	Company
DOCUMENT NUMBER: M1200000155		
The enclosed Resignation of Registered Ager for filing.	nt for a Limite	d Liability Company and fee are submitted
Please return all correspondence concerning t	this matter to t	he following:
RESIGNATIONS DEPARTMENT		
Name of Person		_
CORPORATION SERVICE COMPANY		
Name of Firm/Company		-
251 LITTLE FALLS DRIVE		
Address		-
WILMINGTON, DE 19808		
City/State and Zip Code		-
ANNUALREPORTS@CSCGLOBAL.COM		
E-mail address: (to be used for future annual repo	ort notification)	-
For further information concerning this matte	r, please call:	
RESIGNATION DEPT	800 at (927-9801
Name of Person	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the prov	risions of section 605.0115, Florida Statutes, the unc	dersigned.	
CORPORATION SERVICE COMPANY		_ , hereby resigns as	
	Name of Registered Agent		
Registered Agent fo	GLOBAL INDEPENDENT ADVISORS, LLC		
	Name of Limited Liability Company	,	
M12000000155			
Docume	nt Number, if known		
A copy of this resign	nation was mailed to the above listed limited liabilit	y company at its last known address.	
The agency is termi	nated and the office discontinued on the 31st day af	ter the date on which this statement is filed	
	(Ulane: Wahri assissans indus: Signature of Resigning Agent	2622 DEC -6	
If signing on behalf	of an entity:	DEC.	
	BY ALEXXIS WEILAND	- 6	
	Typed or Printed Name		
	ASSISTANT VICE PRESIDENT		
	Capacity		

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