M/6000001557

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SECRETARY OF STAIL TALLAHASSEE, FLORIG*I*

K. SALY APR 1 0 2017

COVER LETTER

Division of Corporations		ν,
GUD ID CO. GUPTA WEALTH MANA	AGEMENT, LLC	
SUBJECT: GUPTA WEALTH MANA	me of Limited Liability	Company
DOCUMENT NUMBER: M1600000		
		Liability Company and fee are submitted
Please return all correspondence conce	rning this matter to th	e following:
Emily Smith		
Name of Person		
Paracorp Incorporated		
Name of Firm/Compa	iny	
PO Box 160568		
Address		
Sacramento, CA 95816		
City/State and Zip Co	ode	
E-mail address: (to be used for future ann	nual report notification)	
For further information concerning this	s matter, please call:	
Emily Smith	888	280.6563 Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number

MAILING ADDRESS:

liability company.

TO: Registration Section

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 provision	ons of section 605.0115, Florida Statutes, the	e undersigned,
Paracorp Incorpora		, hereby resigns as
	Name of Registered Agent	
Registered Agent for	BUPTA WEALTH MANAGEMENT, L	LC The state of th
registered rigent for		25
	Name of Limited Liability Company	
M16000001557	·	
Document N	umber, if known	
A copy of this resignati	on was mailed to the above listed limited lia	ability company at its last known address.
The agency is terminate	ed and the office discontinued on the 31st day	ay after the date on which this statement is filed.
	Signature of Resigning A	Agent
If signing on behalf of a	an entity:	
	Sharon Cooke, Paracorp Incorpora	ated
	Typed or Printed Name	
	Assistant Secretary	. <u></u>
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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