# D3000[51587

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

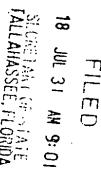
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AUG 01 2018 S. YOUNG



### CT Corp.

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

**Date:** 7/31/2018

Acc#120160000072
RPB INVESTMENTS, INC.
11093413
Country of Destination: Number of Certs:
Certified: Plain: COGS:
Amount: \$ 87.50

Thank you!

#### COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: RPB INVESTMENTS, INC. (Name of Corporation) DOCUMENT NUMBER: P03000151589 The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Helen Mac-Tran (Name of Person) C T CORPORATION SYSTEM (Name of Firm/Company) 111 8th Avenue, 13th Floor (Address) New York, New York 10011 (City/State and Zip Code) For further information concerning this matter, please call: at (212)590-9118
(Area Code & Daytime Telephone Number) Helen Mac-Tran (Name of Person)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  Florida Statutes, the undersigned, NRAI SERVICES, INC.  (Name of Registered Agent)
hereby resigns as Registered Agent for RPB INVESTMENTS, INC.  (Name of Corporation)
(riallo di competation)
P03000151589
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation 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:
NRAI SERVICES, INC Helen Mac-Tran
(Typed or Printed Name)
ASSISTANT SECRETARY
(Capacity)
LAHAS FIL
\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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