



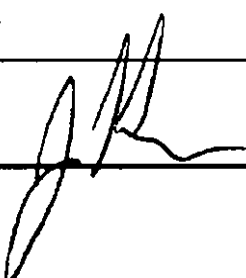
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Certificate of Cancellation
FOREIGN Limited Liability Company

→ Filing Fee: \$75.00

Pursuant to the provisions of RIGL 7-16-53, the undersigned foreign limited liability company hereby cancels its registration to transact business in the State of Rhode Island, and for that purpose, the following statement:

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2020 JUL 27 PM 1:05

1. Entity ID Number. 000487981	2. The name of the limited liability company is: ANNUITY STORE FINANCIAL & INSURANCE SERVICES, LLC
3. It is organized under the laws of: CA	
4. The entity is not transacting business in this state and surrenders its authority to transact business in this state.	
5. It revokes the authority of its agent, to accept service of process and consents that service of process in any action, suit or proceeding arising out of the transaction of business in the state of Rhode Island, may thereafter be made on the limited liability company by service thereof on the Department of State of the State of Rhode Island.	
6. The post office address to which the Department of State may mail a copy of any process against the limited liability company that may be served on him or her is: Sherry Beck c/o Allianz Life -5701 Golden Hills Drive, Minneapolis, MN 55416	
7. The limited liability company certifies that it has no outstanding tax obligations. As required by RIGL <u>7-16-8</u> , the limited liability has paid all fees and taxes. [Note: tax status can be verified at taxportal.ri.gov .]	
8. Date when the Cancellation will be effective. CHECK ONE BOX ONLY	
☒ Date received (Upon filing)	
☐ Later effective date (Date must be no more than 90 days from the date of filing) _____	
Under penalty of perjury, I declare and affirm that I have examined this Certificate of Cancellation of Registration and that all statements contained herein are true and correct.	
Type or Print Name of Authorized Person Jennifer Kurz	Date 7/23/2020
Signature of Authorized Person 	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED
JUL 27 2020
STAMP
BY Ch KZ05J
1:05

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FORM 452- Revised: 06/2020