Filing Fee: \$50.00

ID Number: 00025461

9 DEC 28 AM

CRETARY OF STATE ORPORATIONS DIV

C.



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF WITHDRAWAL

un	ursuant to the provisions of Section 7-1.2-1412 of the General Laws of Rhode Island, 1956, as amer indersigned corporation hereby applies for a Certificate of Withdrawal from the State of Rhode Island, and irpose submits the following statement:	ided, or 2010	the that
1.	The name of the corporation is Transamerica Financial Advisors, Inc.	5	್ವ
2.	It is incorporated under the laws of Delaware	¥ 5	1907. 1907. 1407.
3.		.72m -14	AT OF
4.	It hereby surrenders its authority to transact business in the state of Rhode Island.	=	"STAT
5.	It revokes the authority of its registered agent in this state to accept service of process, and consents that process in any action, suit, or proceeding based upon any cause of action arising in this state during the corporation was authorized to transact business in this state may subsequently be made on the corporative thereof on the Secretary of State of the State of Rhode Island.	time	e ঠা ^ন the ১
6.	The post office address to which the Secretary of State may mail a copy of any process against the corpor is served on the Secretary of State: P O Box 5068, Clearwater, FL 33758	ation	that
7.	As required by Section 7-1.2-1413 of the General Laws, the corporation has paid all fees and taxes.		
8.	If the corporation is in the hands of a receiver or trustee, this Application for Certificate of Withdrawal executed on behalf of the corporation by the receiver or trustee.	mus	t be
9.	This Application for Certificate of Withdrawal shall be effective upon filing unless a specified date is provi shall be no later than the 90 th day after the date of this filing	ded v	which

Date: September 4, 2009

FILED

JAN 15 2010

examined this Application for Certificate of Withdrawal, including any accompanying attachments, and that all statements contained herein are true and correct.

Signature of Authorized Officer of the Corperation

Under penalty of perjury, I declare and affirm that I have

George Chuang

Type or Print Name of Authorized Officer

Form No. 154 Revised: 12/05 Department of Revenue DIVISION OF TAXATION One Capitol Hill Providence, RI 02908-5800

January 6, 2010

SECRETARY OF STATE CORPORATIONS DIV

TO WHOM IT MAY CONCERN:

Re: TRANSAMERICA FINANCIAL ADVISORS INC

It appears from our records that the above named corporation has filed all the required Business Corporation Tax Returns due to be filed and paid all taxes indicated thereon and is in good standing with this Division as of this date regarding any liability under the Rhode Island Business Corporation Tax Law.

This letter is issued pursuant to the request of the above named corporation for the purpose of

WITHDRAWAL

Very truly yours

David M. Sullivan Tax Administrator

Charles J. Larocque Chief Revenue Agent

Corporations



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

