

F07000004353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

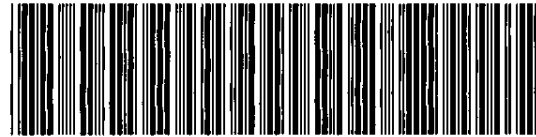
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/25/08--01001--001 **35.00

*Resignation
to RA*

RECEIVED
08 NOV 24 PM 2:52
STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2008 NOV 24 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RR
11/24/08

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: ASHLEY SMITH

DATE: 11-24-2008

REF. #: 001117.95899

CORP. NAME: LOANIO, INC.

- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| (XX) OTHER: RESIGNATION | | |

STATE FEES PREPAID WITH CHECK# 528398 FOR \$ 35.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|-------------------------|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | (XX) PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 NOV 25 PM 3:11

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

November 24, 2008

CorpDirect Agents, Inc.
515 East Park Avenue
Tallahassee, FL 32301

SUBJECT: LOANIO, INC.
Ref. Number: F07000004353

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

We have received your document for LOANIO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records list Corporate Service Bureau as the registered agent. Please see the attached printout.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 508A00058296

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

FILED

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

2000 NOV 24 AM 8:22

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Corporate Service Bureau Inc.

(Name of Registered Agent)

hereby resigns as Registered Agent for Loanio, Inc.

(Name of Corporation)

F07000004353

(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.

Patricia Tadlock Asst. Sec.
(Signature of Resigning Agent)

If signing on behalf of an entity:

Patricia Tadlock

(Typed or Printed Name)

Assistant Secretary

(Capacity)

Fee for filing this document:

\$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**