MU4000005049

•	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Sity/States/2.ph Hone hy	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



500078612925

RECEIVED

06 AUG 21 PH 2: 54

AUG 21 PH 2: 54





ON SERVICE COMPANY.	
ACCOUNT NO.	: 072100000032
REFERENCE	: 322537 5142120
AUTHORIZATION	: Sould ble man Fig E
COST LIMIT	: \$ (25.00)
ORDER DATE : August 18, 2006	C. C
ORDER TIME : 1:35 PM	OAL COAL
ORDER NO. : 322537-020	7
CUSTOMER NO: 5142120	•
FOREIGN FI	LINGS
NAME: ACADEMY FINANC LLC	IAL SERVICES,
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY	
XXXX WITHDRAWAL/CANCELLATION	
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS	•
CONTACT PERSON: Sara Lea - EXT	# 2914
	EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

Por Property and the second se
CG III
The second secon
Academy Financial Services, LLC
(Name of limited liability company)
ب المراجعة
Delaware
(Jurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
One Home Campus MAC X2401-049
(Mailing address)
T 14 C0000
Des Moines, IA 50328 (City/State/Zip)
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of member of authorized representative of a member)
(priming of million or manoring representants or a manner)

Filing Fee: \$25.00

Karolyn Baker, Vice President of Wells Fargo Bank, N.A., member of

(Typed or printed name of signee)