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	equestor's Name)	
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(Ad	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
· (Do	ocument Number)	<u> </u>
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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DEPARTMENT OF STATE 2013 DEC -9 AM 11: 2

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ON SERVICE COMPANY					
ACCOUNT NO.	:	I20000001.	95		
REFERENCE	:	913620	7864759		
AUTHORIZATION	:	anul of	enan		
COST LIMIT	:	\$ (25),00	ende	,	
ORDER DATE : December 9, 2013					
ORDER TIME : 11:28 AM					
ORDER NO. : 913620-025					
CUSTOMER NO: 7864759					
FOREIGN FI NAME: SOUTHWEST PROP LLC			S,		
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY	ζ			2018 DEC SLUME FALL AHA	
XXXX WITHDRAWAL/CANCELLATION				SSEE ARY 6	
PLEASE RETURN THE FOLLOWING AS	PRO	OOF OF FILI	NG:	AM II BF ST EFLO	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS				I: 23	
CONTACT PERSON: Susie Knight -	- EX	(T# 52956			
	T	YAMTNED.			

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

Southwest Property Investors, LLC					
(Name of limited liability company)					
Delaware					
(Jurisdiction of its organization)					
М05000002479					
(Florida Document Number)					
This limited liability company is no longer transacting business in Florida and surrender authority to transact business in this state.	s its				
This limited liability company revokes the authority of its registered agent to accept service of behalf and appoints the Department of State as its agent for service of process based on a confaction arising during the time it was authorized to transact business in Florida.	n its ause				
3570 Keith Street, NW					
(Mailing address)					
Cleveland, TN 37312					
(City/State/Zip)					
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.	inge				
Southwest Property Investors, LLC	i^{j}	2013			
By: Developers Investment Company II, Inc., corporate manager			Chica		
Dank Tuumond	\$35	3			
Signature of member or authorized representative of a member)	> :	C	nche.		
Joan E. Thurmond, Assistant Secretary	HESS ARM	-9			
Typed or printed name of signee)	er STA	AM II: 2			

Filing Fee: \$25.00