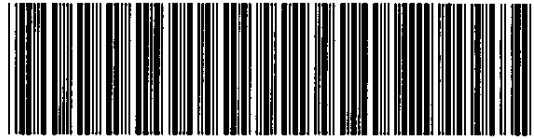


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 648400 5142120
AUTHORIZATION : [Signature]
COST LIMIT : \$ 25.00

ORDER DATE : December 7, 2006
ORDER TIME : 10:04 AM
ORDER NO. : 648400-045
CUSTOMER NO: 5142120

FOREIGN FILINGS

NAME: AVENUE FINANCIAL SERVICES, LLC

XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

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CONTACT PERSON: Amanda Haddan - EXT# 2955

EXAMINER: \_\_\_\_\_

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

Avenue Financial Services, LLC

(Name of limited liability company)

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.

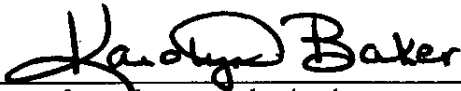
One Home Campus MAC X2401-06T

(Mailing address)

Des Moines, IA 50328

(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 or authorized representative of a member)

Karolyn Baker, Vice President

(Typed or printed name of signee)

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**Filing Fee: \$25.00**