

M19000010579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

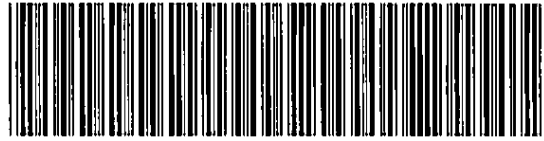
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200408897582

FILED
2023 MAY 24 PM 12:23
TALLAHASSEE STATE
OFFICE OF REVENUE
FL

2023 MAY 24 AM 8:40
OFFICE OF REVENUE
TALLAHASSEE, FLORIDA

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 05/23/23

NAME: IAG FINANCIAL, LLC

TYPE OF FILING: WITHDRAWAL

COST: 30.00

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



Please File ASAP.

Thank You!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IAG Financial LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Franey

(Name of Person)

The Wealth Alliance, LLC

(Firm/Company)

105 Broadhollow Road

(Address)

Melville, New York 11747

(City/State and Zip Code)

For further information concerning this matter, please call:

William Franey _____ at (631) 670-0703
(Name of Person) (Area Code & Daytime Telephone Number)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

FILED

20231124 PM 12:23

SECRETARY OF STATE
TALLAHASSEE, FL

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

IAG Financial LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

11/01/2019

(Date registered with Florida Department of State)

M19000010579

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

William Franey

(Typed or printed name of signee)