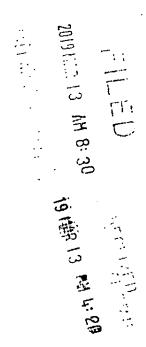
853737

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (Addiess) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
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| |

Office Use Only



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Milhdrawal

MAR 1.4 2019

I ALBRITTON

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 683189 7329165

AUTHORIZATION :

COST LIMIT : \$\begin{aligned} 35.00 \\ \exists{1} \\ \exists{2} \\ \exists{3} \\ \exists{2} \\ \exists{3} \\ \exit{5} \exit{.00} \\ \exit{6} \\ \exit{

ORDER DATE: March 13, 2019

ORDER TIME : 3:19 PM

ORDER NO. : 683189-005

CUSTOMER NO: 7329165

FOREIGN FILINGS

NAME: WELLS FARGO FOOTHILL, INC.

XX __ CORPORATE ____ LIMITED PARTNERSHIP

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: Emily Croft - EXT# 62925

EXAMINER:

COVER LETTER

| | mendment Section | | |
|-------------|---|--|--|
| | vision of Corporations $_{\Gamma:}$ Wells Fargo Foot | hill Inc | |
| SUBJEC | r: vvono i digo i dot | (Name of Corporation | n) |
| DOCUM | ENT NUMBER: <u>853737</u> | | <u></u> |
| The enclo | sed withdrawal application and | fee are submitted for f | īling. |
| | urn all correspondence concerning the following: | this | |
| (| CSC | | |
| _ | | (Name of Person) | |
| | | (Firm/Company) | · · · · · · · · · · · · · · · · · · · |
| _ | | (Address) | |
| | (C | ity/State and Zip code |) |
| For further | r information concerning this matt | er, please call: | |
| CSC | • | at () | |
| Enclosed i | (Name of Person) s a check for the amount: | (Area Coo | le & Daytime Telephone Number) |
| \$35 Fil: | ing Fee \$\infty\$\$43.75 Filing Fec & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) | Certificate of Status & Certified |
| | MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314 | | STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301 |

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

| Wells Fargo Foothill, Inc. | |
|--|---|
| (Name of Corporation) | |
| 853737 | |
| (Document Number of Corporation (i | f known) |
| California | |
| (Incorporated Under Laws of | , |
| This corporation is no longer transacting business or conducting affivoluntarily surrenders its authority to transact business or conduct af | fairs in Florida. |
| This corporation revokes the authority of its registered agent in F appoints the Department of State as its agent for service of process the time it was authorized to transact business or conduct affairs in F | s based on a cause of action arising during |
| The following is a current mailing address for the corporation: | 2019 |
| 2450 Colorado Ave., Suite 3000 | OW 3 |
| (Mailing Address) | · Pr |
| Santa Monica, CA 90404 | AH 8: 30 |
| (City/ State /Zip) | |
| The corporation agrees to notify the Department of State in the future | e of any change in its mailing address. |
| | 3.13.19 |
| (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) | (Date) |
| Katherine Kilbourne | CFO/Secretary/Treasurer |
| (Typed or printed name of person signing) | (Title of person signing) |