# F0700000357

(Re	equestor's Name)		
(Ac	ddress)		
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(Ci	ty/State/Zip/Phone	e #)	
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withdrawal



DN SERVICE COMPANY			
ACCOUNT NO. : 12000000195			
REFERENCE : 204318 4392103			
AUTHORIZATION: Spullicle was			
COST LIMIT : \$ 43.75			
ORDER DATE : July 3, 2014			
ORDER TIME : 2:49 PM			
ORDER NO. : 204318-020			
CUSTOMER NO: 4392103			
FOREIGN FILINGS			
NAME: INDYMAC FINANCIAL SERVICES INC.			
XX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY			
XXXX WITHDRAWAL/CANCELLATION			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF STATUS			
CONTACT PERSON: Emily Gray - EXT# 62925			
EXAMINER:			

### **COVER LETTER**

		idment Section ion of Corporations	
SUBJE	<b>CT</b> .	INDYMAC FINANCIAL SERVICES, INC.	
SCDIE	C1.	(Name of Corporation)	
DOCUI	MEN	T NUMBER: F07000000357	
The enc	losed	withdrawal application and fee are submitted for filing.	
		all correspondence concerning this following:	
	Sus	an Vivino	
		(Name of Person)	
	Indymac Financial Services		
		(Firm/Company)	
	888	East Walnut Street	
		(Address)	
	Pas	adena, CA 91101	
		(City/State and Zip code)	
For furt	her in	formation concerning this matter, please call:	
Susan Vivino		626 535-1642 at (	
Enclose	d is a	(Name of Person) (Area Code & Daytime Telephone Number) check for the amount:	
<b>√</b> \$35 1	Filing	\$43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)	
		MATTING ADDRESS. CERET ADDRESS	

#### **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

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tion (if known)
aws of)
aws of)
ng affairs within the State of Florida and hereby luct affairs in Florida.
rocess based on a cause of action arising during in Florida.
,
future of any change in its mailing address.
Assistant Secretary
(Title of person signing)

**FILING FEE \$35**