

2013-01-08 10:36 TRIAD

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC
Account Number : I20020000094
Phone : (770)777-2091
Fax Number : (770)220-1943

DISSOLUTION OR WITHDRAWAL
LEAP AUTO LOANS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

CC Withdr

RECEIVED

13 JAN -8 PM 12:37

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2013 JAN -8 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JAN 9 2013

T. LEWIS

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LEAP AUTO LOANS, INC.

(Name of Corporation)

DOCUMENT NUMBER: F10000000125

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen Rodriguez

(Name of Person)

Triad Professional Services

(Firm/Company)

1720 Windward Concourse, Suite 390

(Address)

Alpharetta, GA 30005

(City/State and Zip code)

For further information concerning this matter, please call:

Karen Rodriguez

at (770) 777-2091

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☒ \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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

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(((H13000005650 3)))

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

LEAP AUTO LOANS, INC.

(Name of Corporation)

F10000000135

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

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TALLAHASSEE, FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida 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 or conduct affairs in Florida.

The following is a current mailing address for the corporation:

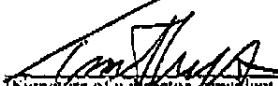
6195 Lusk Blvd., Suite 210

(Mailing Address)

San Diego, CA 92121

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

12-31-12
(Date)

Timothy R. Condon

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35

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