

MO1000000233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

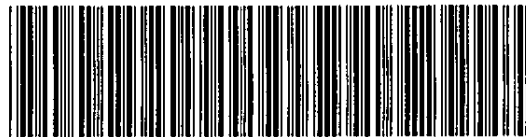
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600158921716

RECEIVED

09 AUG - 3 PM 4: 11

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

09 AUG - 3 AM 8: 15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

AUG - 4 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 080252 4319383

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED  
08 AUG -3 AM 8:15  
TALLAHASSEE, FLORIDA

ORDER DATE : July 28, 2009

ORDER TIME : 2:05 PM

ORDER NO. : 080252-060

CUSTOMER NO: 4319383

FOREIGN FILINGS

NAME: SLP HOUSING II, LLC

XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT# 2908

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

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

SLP Housing II, LLC

(Name of limited liability company)

NEVADA

(Jurisdiction of its organization)

FILED  
09 AUG -3 AM 8:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

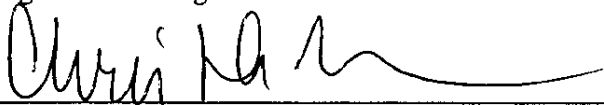
1 SunAmerica Center, 37th Floor

(Mailing address)

Los Angeles, CA 90067

(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)

Christine A. Nixon

(Typed or printed name of signee)

**Filing Fee: \$25.00**