M1200000991

(Requestor's N	Jame)
(Address)	
(Address)	
(City/State/Zip.	/Phone #)
PICK-UP WA	IT MAIL
(Business Enti	ty Name)
(Document Nu	mber)
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SEP - 7 2011

EXAMINER



800210910638

2011 SEP -7 PM 1: 5

DIVISION OF CORPORATION OF SEATE



ACCOUNT NO. : 12000000195

REFERENCE : 903845 5142120

AUTHORIZATION

COST LIMIT (

ORDER DATE : September	7,	, 2011	

ORDER TIME : 12:45 PM

ORDER NO. : 903845-080

CUSTOMER NO: 5142120

FOREIGN FILINGS

	NAME:	REAL	LIVING	MORTGAGE	, LLC	
	CORPORAT	Έ				
	LIMITED	PARTNERS	SHIP			
XXX	LIMITED	LIABILIT	TY COMPA	ANA		
XXXX	WITHDRAWA	L/CANCEI	LATION			
PLEAS	E RETURN	THE FOLI	OWING A	AS PROOF	OF FILING:	
	CERTIF	IED COPY	7			
XX		STAMPED				
		ICATE OF		3		
			~	-		

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER:

COVER LETTER

FO: Registration Division of	section Corporations			
SUBJECT: Real	Living Mortgage, LLC	reign Limited Liability	Company)	
Dear Sir or Madam:				
The enclosed withdr	awal and fee(s) are submitte	ed for filing.		
Please return all corr	espondence concerning this	s matter to the following	3:	
Karolyn Baker, \	Vice President			
	(Name of Person)			
Wells Fargo Ver	itures, LLC			
	(Firm/Company)			
One Home Cam	ous, MAC X2401-05W			
	(Address)			
Des Moines, IA	50328			
	(City/State and Zip Coc	le)	•	
For further informati	on concerning this matter, p	olease call:		
Karolyn Baker		at (515	213-5548	
(Na	une of Person)		Daytime Telephone Number)	
Registration Division of Clifton Buil 2661 Execu	Corporations	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations fox 6327 assee, Florida 32314	
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	

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

Real Living Mortgage, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
M02000000991
(Florida Document Number)
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.
One Home Campus, MAC X2401-05W
(Mailing address)
Des Moines, IA 50328
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Hardyn Baker
(Signature of member or authorized representative of a member)
Karolyn Baker, Vice President
(Typed or printed name of signee)

Filing Fee: \$25.00