

MB3600002693

(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:

[Handwritten signature]

Office Use Only



500109921835

RECEIVED

07 OCT 12 PM 4:15

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

FILED

07 OCT 12 AM 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 270903 5142120

AUTHORIZATION :

COST LIMIT : \$ 25.00

07 OCT 12 AM 8:44
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : October 12, 2007

ORDER TIME : 3:03 PM

ORDER NO. : 270903-035

CUSTOMER NO: 5142120

FOREIGN FILINGS

NAME: FINANCIAL RESOURCES MORTGAGE,
LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER: _____

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

FINANCIAL RESOURCES MORTGAGE, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

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.

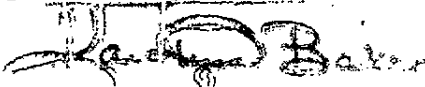
One Home Campus, MAC# X2401-06T

(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.



(Signature of member or authorized representative of a member)

Karolyn Baker, Vice-President

(Typed or printed name of signee)

FILED
07 OCT 12 AM 8:44
TALLAHASSEE FLORIDA
SECRETARY OF STATE

Filing Fee: \$25.00