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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

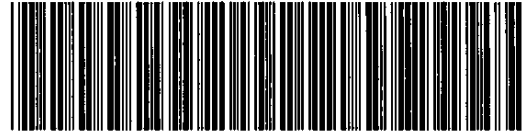
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
06 NOV - 9 AM 10:54
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 584979 5142120

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED
06 NOV -9 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : November 8, 2006

ORDER TIME : 9:43 AM

ORDER NO. : 584979-050

CUSTOMER NO: 5142120

FOREIGN FILINGS

NAME: STONRIDGE MORTGAGE, LLC

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER: _____

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

Stoneridge Mortgage, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

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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.

One Home Campus MAC X2401-049
(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)

Filing Fee: \$25.00