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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

APR 1 0 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: American Residential Equities X (Name of Foreign Limited Liability Empany)	111, LCC
Dear Sir or Madam:	
The enclosed withdrawal and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Lisette Smyth (Name of Person)	09 SE TAL
American Residential Equities (Firm/Company)	99 APR -9 PM 1: 08 SECRETARY OF STATE FALLAHASSEE, FLORIDA
2411 Ocean Avenue	F STATE
Venice CA 90 a 91 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (786) 866-497 (Area Code & Daytime Telephone Num	hber)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	
\$25 Filing Fee \$25 Certificate of Status Certified Copy Certified Copy	tus &

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

(Signature of member or authorized representative of a member) (Signature of member or authorized representative of a member)	American Residential Equities XLII, LLC
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. **Revolution** **R	(Name of limited liabill company)
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. **Revolution** **R	00/0 000
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. 848	(Jurisdiction of its organization)
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. 848	
(Mailing address) Miami FL 3313 (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) The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.	This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
(Signature of member or authorized representative of a member) Typed or printed name of signee)	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.
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) Typed or printed name of signee)	848 Brickell Ave. Penthouse (Mailing address)
(Signature of member or authorized representative of a member) (Typed or printed name of signee)	Miami, FL 33131 (City/State/Zip)
Typed or printed name of signee)	The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Typed or printed name of signee)	(Signature of member or authorized representative of a member)
(Typed or printed name of signee)	\pm $\sqrt{2}$
	(Typed or printed name of signee)
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Filing Fee: \$25.00