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PICK-UP	☐ WAIT	MAIL
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Office Use Only



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26/19 DE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 609271 7539224

AUTHORIZATION

COST LIMIT

ORDER DATE: January 31, 2019

ORDER TIME : 10:19 AM

ORDER NO. : 609271-045

CUSTOMER NO: 7539224

## FOREIGN FILINGS

NAME: PACIFIC UNION FINANCIAL, 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: Emily Croft - EXT# 62925

EXAMINER:

## **COVER LETTER**

		on Section f Corporations					
SUBJECT		c Union Financial, LLC					
SOBJECT	·	(Name of Fo	reign Limited Liabi	lity Company)			
Dear Sir or	r Madam	:					
The enclos	ed withd	rawal and fee(s) are submitte	d for filing.				
Please retu	m all coi	respondence concerning this	matter to the follow	ving:			
		(Name of Person)					
		(value of reason)				<del></del> 1	~ 7
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	*	(City/State and Zip Cod	(c)	<del></del>			
For further	informat	ion concerning this matter, p	lease call:				
Karen Rob	ъb		972	894-9743			
	()	lame of Person)	at ( (Area Coo	) le & Daytime Tele	phone Number)		
ç	OR ERTA	COURIER ADDRESS:	M	AILING ADDI	eess:		
Registration Section Regis		gistration Section	on				
	ivision oi lifton Bu	f Corporations ilding	Division of Corporations P.O. Box 6327				
26	61 Exec	utive Center Circle c, Florida 32301		llahassee, Floric	la 32314		
Enclosed i	s a check	t for the following amount:					
□ <b>\$</b> 25 Fili	ng Fee	☐ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee Certified Copy	Certific	ling Fee, cate of Status & ed Copy		

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Pacific Union Financial, LLC
(Name of limited liability company)
California
(Jurisdiction of its organization)
02/11/2005
(Date registered with Florida Department of State)
M05000000788
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
If an effective date is listed, the date must be specific and cannot be prior to date of filing or nore than 90 days after filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, his date will not be listed as the document's effective date on the Department of State's records.
Jaren L. Bobl
(Signature of authorized representative)
Karen I Robb
(Typed or printed name of signee)

Filing Fee: \$25.00