

1705 000001627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

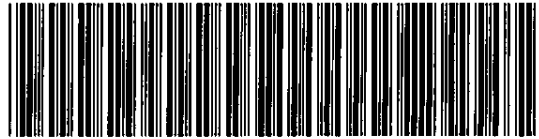
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400140079224

01/13/09--01011--018 **30.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JAN 13 AM 10:57

FILED

S. HAWKES

JAN 15 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Search2Close of Cleveland, Limited, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brooke Munekata

(Name of Person)

Search2Close

(Firm/Company)

2400 Corporate Exchange Drive, Suite 200

(Address)

Columbus, OH 43231

(City/State and Zip Code)

For further information concerning this matter, please call:

Brooke Munekata

(Name of Person)

at (614) 212-5322

(Area Code & Daytime Telephone Number)

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 ☒ \$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**

Search2Close of Cleveland, Limited, LLC
(Name of limited liability company)

1105-1627

Ohio

(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.

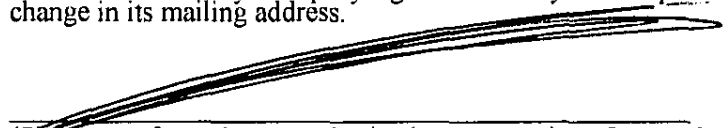
2400 Corporate Exchange Drive, Suite 200

(Mailing address)

Columbus, OH 43231

(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)

Kevin R Alexander

(Typed or printed name of signee)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JAN 13 AM 10:57

FILED

Filing Fee: \$25.00