

MOS000003332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

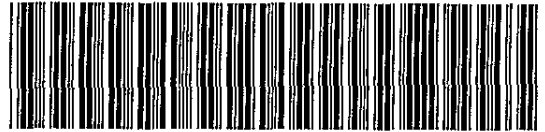
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700067452887

03/19/06--01031--011 \*\*25.00

2006 MAR -9 AM 10:53  
SECRETARY OF STATE  
ALABAMA SECRET LTRN

FILED

MOS-3332  
JL

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: FORTRESS MORTGAGE & FINANCIAL SERVICES, 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:

Leo Phillips  
(Name of Person)

FORTRESS MORTGAGE & FINANCIAL SERVICES, LLC  
(Firm/Company)

4203 CR 51  
(Address)

BUTLER IN 46721  
(City/State and Zip Code)

2006 MAR -9 AM 10:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Leo Phillips at (260) 402-4284  
(Name of Person) (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**

FORTRESS MORTGAGE & FINANCIAL SERVICES, LLC  
(Name of limited liability company)

INDIANA  
(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.

4203 CR 51  
(Mailing address)

BUTLER, IN 46721  
(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)

LEO PHILLIPS  
(Typed or printed name of signee)

2006 MAR -9 AM 10:53  
SECRETARY OF STATE  
TALLAHASSEE  
FLORIDA

FILED

Filing Fee: \$25.00