## M05000003810

(Red	questor's Name)	
(Add	lress)	
, (Add	dress)	
(City	//State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	e)
, (Doc	cument Number)	·····
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B. KOHR

OCT 1 3 2011

**EXAMINER** 



000213097110

11 OCT 13 AH 10: 41 RECEIVED



ACCOUNT NO. : 12000000195

REFERENCE : 943280 5142120

AUTHORIZATION :

COST LIMIT

ORDER DATE: October 12, 2011

ORDER TIME : 2:46 PM

ORDER NO. : 943280-035

CUSTOMER NO: 5142120

## FOREIGN FILINGS

NAME: PNC REVERSE MORTGAGE, LLC

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY \_\_\_\_\_ CERTIFICATE OF STATUS

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER:

## **COVER LETTER**

_	tion Section of Corporations			
SUBJECT: P	NC Reverse Mortgage, LI (Name of Fo	.C reign Limited Liability	Company)	_
Dear Sir or Mada	m:			
The enclosed wit	hdrawal and fee(s) are submitt	ed for filing.		
Please return all o	correspondence concerning thi	s matter to the followin	g:	
Karolyn Bake	r			
	(Name of Person)		_	
Wells Fargo V	entures, LLC			
	(Firm/Company)		**************************************	
One Home Ca	(Address)  A 50328	7	· -	
	(City/State and Zip Co	Je)	_	
For further inform Karolyn Baker	nation concerning this matter,		, 213-5548	
rear ory in Dane.	(Name of Person)	at (Area Code &	Daytime Telephone Number)	-
Registra Division Clifton E 2661 Ex Tallahas	ecutive Center Circle see, Florida 32301	Regis Divis P.O. 1 Tallal	LING ADDRESS: tration Section ion of Corporations 30x.6327 nassee, Florida 32314	
Enclosed is a che	© \$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

NC Reverse Mortgage, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
M05000003810
(Florida Document Number)
This limited liability company is no longer transacting business in Florida and surrenders authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service ts behalf and appoints the Department of State as its agent for service of process based of action arising during the time it was authorized to transact business in Florida.
One Home Campus, MAC X2401-05W
(Mailing address)
Des Moines, IA 50328
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of a change in its mailing address.
Had Baker
Signature of member or authorized representative of a member)
Karolyn Baker, Vice President
Typed or printed name of signee)

Filing Fee: \$25.00