

**M06000002454**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

**\*RE-SUBMIT\***

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)222-1092  
Fax Number : (850)878-5368

Please retain original filing date of submission 3/17

**LLC DISSOLUTION OR WITHDRAWAL  
ML PRIVATE FINANCE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	024
Estimated Charge	\$25.00

RECEIVED  
14 MAR 18 PM 1:51  
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TALLAHASSEE, FLORIDA

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Electronic Filing Menu

Corporate Filing Menu

Help

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ML Private Finance 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:

Devra Lindgren

(Name of Person)

ML Private Finance LLC

(Firm/Company)

400 National Way, CA6-919-02-01

(Address)

Simi Valley, CA 93065

(City/State and Zip Code)

For further information concerning this matter, please call:

Devra Lindgren

(Name of Person)

at 805 520-5763  
(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

850-617-8381

3/18/2014 9:58:45 AM PAGE 1/001 Fax Server



March 18, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION

SUBJECT: ML PRIVATE FINANCE LLC  
REF: M06000002454

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The wrong form was used.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan  
Regulatory Specialist II

FAX Aud. #: H14000063909  
Letter Number: 514A00005768

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**\*RE-SUBMIT\***

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

ML Private Finance LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

05/1/2006

(Date registered with Florida Department of State)

M06000002454

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Nina Tai

(Typed or printed name of signee)

Nina Tai, Asst. Secty  
Bank of America, National Association  
Sole Member

Filing Fee: \$25.00