

MO6000004220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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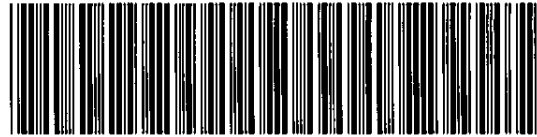
(Business Entity Name)

(Document Number)

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STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR
JUN 19 2008
EXAMINER

FILED
08 JUN 19 PM 3:35
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 617241 5142120

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 25.00

ORDER DATE : June 19, 2008

ORDER TIME : 12:24 PM

ORDER NO. : 617241-045

CUSTOMER NO: 5142120

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TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: A.G. EDWARDS MORTGAGE, 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: Carina L. Dunlap - EXT# 2951

EXAMINER: _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA**

A.G. EDWARDS MORTGAGE, LLC

(Name of limited liability company)

DELAWARE

(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.


ONE HOME CAMPUS, MAC# X2401-06T

(Mailing address)

DES MOINES, IA 50328-0001

(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)

KAROLYN BAKER, VICE-PRESIDENT

(Typed or printed name of signee)

Filing Fee: \$25.00

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