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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN APR 10 2009 EXAMINER

## **COVER LETTER**

Division of Corporations		
SUBJECT: American Resider (Name of Foreign I	Atial Equities LVIII, LL Limited Liability Empany)	بد
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted for	filing.	
Please return all correspondence concerning this matter	er to the following:	
Lisette Smyth (Name of Person)	SECRE	09 APR
American Residential (Firm/Company)	Equities PERSEE, FL	09 APR -9 PM 1:16
2411 Ocean Avenue	ORUE ORUE	: 16
Venice CA 90 (City/State and Zip Code)	201	
For further information concerning this matter, please	; call:	
Cisette Smyth (Name of Person)	at (786) 866-4973 (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:		
	\$55 Filing Fee & \$\infty\$\$\$ \$\sqrt{\$60}\$ Filing Fee, Certified Copy Certified Copy	

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

American Kesidential Equities LVIII, LLC	
(Name of limited liabilit Company)	
Delaware	
(Jurisdiction of its organization)	<del></del>
This limited liability company is no longer transacting business in Florida and surrende authority to transact business in this state.	rs its
This limited liability company revokes the authority of its registered agent to accept servi its behalf and appoints the Department of State as its agent for service of process based cause of action arising during the time it was authorized to transact business in Florida.	ce on on a
848 Brickell Ave Penthouse (Mailing address)	
Miami, FL 33131 (City/State/Zip)	
The limited Hability company agrees to notify the Department of State in the future of change in its mailing address.	f any
(Signature of member or authorized representative of a member)	
Jeffrey Kirsch	_
(Typed or printed name of signee)  LLAHASSEE, FLORI	09 APR -9 PH 1:1
en e	σ

Filing Fee: \$25.00