#110700006678

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PiCK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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K. SALY EXAMINER NOV 1 8 2010

COVER LETTER

TO: Registration Division of C			
SUBJECT: Silver	Valley Mortgage LL(Creign Limited Liability (Company)
	·	,	,
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitte	ed for filing.	
Please return all corre	spondence concerning this	matter to the following	:
Anthony J Byrne	s		
	(Name of Person)		
Cilves Velley Me			
Silver Valley Mo	(Firm/Company)		
	(company)		
One East Broad	Street Suite 450		
	(Address)		
Bethlehem, PA	18018		
	(City/State and Zip Cod	le)	
For further informatio	n concerning this matter, p	olease call:	
Beth A. Muthard	<u>l</u>	at (610	509-5690
(Nan	ne of Person)	(Area Code &	Daytime Telephone Number)
STREET/CO	OURIER ADDRESS:	MAIL	ING ADDRESS:
Registration		Registration Section	
Division of C		Division of Corporations	
Clifton Build	_	P.O. Box 6327	
	ve Center Circle Florida 32301	Tallaha	assee, Florida 32314
Enclosed is a check for	or the following amount:		
\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

SILVER VALLEY MORTGAGE LLC **ONE EAST BROAD STREET, SUITE 450** BETHLEHEM, PA 18018 610-691-6015

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: M0700006678

To Whom It May Concern,

Please be advised that effective immediately, Silver Valley Mortgage LLC will be withdrawing the authority to transact in Florida.

Should you need anything further, please feel free to contact me at 610-691-6015.

Regards,

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

Silver Valley Mortgage, LLC
(Name of limited liability company)
Pennsylvania
(Jurisdiction of its organization)
M07000006678
(Florida Document Number)
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 East Broad Street, Suite 450 (Mailing address)
Bethlehem, PA 18018 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
a fa
(Signature of member or authorized representative of a member)
Anthony Byrnes
(Typed or printed name of signee)

Filing Fee: \$25.00