#11080000000498

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
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K. SALY EXAMINER

APR 2 2 2014



ACCOUNT NO. : 12000000195 REFERENCE : 633702 167868A AUTHORIZATION COST LIMIT ORDER DATE: May 2, 2013 ORDER TIME : 11:52 AM ORDER NO. : 633702-045 CUSTOMER NO: 167868A FOREIGN FILINGS NAME: A.G. EDWARDS & SONS, LLC XX____ LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY CONTACT PERSON: Troy Todd - EXT# 62940

EXAMINER:

COVER LETTER

			Section Corporations		
SUBJEC	т.	A.G. E	Edwards & Sons, LL	С	
00000	· · ·		(Name of For	reign Limited Liability	Company)
Dear Sir	or M	adam:			
The enclo	osed	withdra	wal and fee(s) are submitte	d for filing.	
Please re	turn a	all corre	espondence concerning this	matter to the following	; :
Beverl	y W	. Jack	son		
			(Name of Person)		-
Wells I	Farg	30 & C	Company		
			(Firm/Company)		-
301 Sc	outh	Colle	ge Street Floor		
			(Address)		-
Charlo	tte,	NC 28	3288		
			(City/State and Zip Cod	le)	-
For furthe	er inf	ormatio	on concerning this matter, p	lease call:	
Beverl	y W	. Jack	son	704 at (374-3021
	•	(Na	me of Person)		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 f	or the following amount:		
□ \$25 Fi	ling l	Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

.G. Edwards & Sons, LLC	
(Name of limited liability company)	
Delaurge	
(Jurisdiction of its organization)	
1/30/2008	
(Date registered with Florida Department of State)	
0800000498	
(Florida Document Number)	
nis limited liability company is withdrawing its certificate of authority in this state.	
Beuele M. Becker (Signature of authorized representative) Beverly W. Jackson	
(Typed or printed name of signee)	

Filing Fee: \$25.00