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> 12 JAN 10 PHI2: 00 SECRETARY OF STATE ALLAHASSEE, FLORID

COVER LETTER

	istration Section sion of Corporations	•	`	
SUBJECT:		HARMONIE FI	NANCIAL LLC	
	(Name of Foreign Limited Liability Company)			
Dear Sir or N	ladam:			
The enclosed	withdrawal and fee(s) are submitte	ed for filing.		
Please return	all correspondence concerning this	matter to the following:		
THERESE PI				
	(Name of Person)			
COVENTRY				
	(Firm/Company)			
7111 VALL	EY GREEN ROAD			
	(Address)			
FORT WAS	HINGTON, PA 19034			
	(City/State and Zip Cod	e)		
For further in	formation concerning this matter, p	olease call:		
THERESE P	ITCAVAGE	at (<u>877</u>)	836-8300	
	(Name of Person)	(Area Code & I	Daytime Telephone Number)	
Reg Divi Clift 266	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, 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	

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

HARMONIE FINANCIAL LLC
(Name of limited liability company)
DE
(Jurisdiction of its organization)
M08000001571
(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.
7111 VALLEY GREEN ROAD
(Mailing address)
FORT WASHINGTON, PA 19034
(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) ALAN H. BUERGER, MANAGER (Typed or printed name of signee)

Filing Fee: \$25.00