110000000949

Office Use Only



300239774053

10/01/12--01008--020 **25.00



J. BRYAN

OCT -2 2012

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: Cleve	land Hum (Name of For	e Title Aq eign Limited Liability C	bnipany)	recture of (
Dear Sir or Madam:	িক্ষা একেবলে ব্যাহত (১৯৮৮ সংগ্ৰহণ বিভাগ	5、多:其中 TM、 1、30分(4)多(4件) 的复数	migra i i ing mingunya mining ayang a	CONTRACTOR STATE
The enclosed withdrawal	and fee(s) are submitte	d for filing.	₩**.	
Please return all correspo	ndence concerning this	matter to the following:		
Norman	(Name of Person)			
Cleveland H	UME TIHE (Firm/Company)		: 1	77 OCT
2035 Crock	r Rd Sur (Address)	He 104		PH 2:5
Westake C	(City/State and Zip Cod			51
For further information c	oncerning this matter, p	olease call:		
Norman (Name	ncze of Person)	at (<u>440</u>) (Area Code & l	788-7100 Daytime Telephone Number	
STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, Flo	oorations Center Circle	Registr Divisio P.O. Bo	ation Section of Corporations ox 6327 ssee, 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 &	&

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

Cleveland Home title Agency LLC (Name of limited liability company)
(Name of limited liabHity company)
Onio(Jurisdiction of its organization)
M\00000949 (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.
2035 Crocky Rd Suite 104 (Mailing address)
Westlake Oh 44145 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
7.4
(Signature of member or authorized representative of a member)
NORMAN E. INCLE MANAGING PHATNER 3
(Typed or printed name of signee) Managene Pathers (Typed or printed name of signee)

Filing Fee: \$25.00