## M/4000003758

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	: #J)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500289579135

08/30/16--01011--018 \*\*25.00

16 AUG 30 PM 2: 17

813

August 23, 2016

Withdrawal documents enclosed for foreign LLC:

Urban National Title Services, LLC

(A Georgia LLC)

FL: M16000003758

3235 Satellite Blvd,

Bldg 400, Ste 300,

Duluth, GA 30096

Please return all Urban National Title Services, LLC paperwork or documents to:

Urban Attn: R. Preniczny

202 S. Michigan St., Suite 300

South Bend, IN 46601

Thanks,

R. Renee Preniczny

Phone 574-232-5845

## **COVER LETTER**

	tion Section of Corporations			
SUBJECT:	URBAN NATIO	ONAL TITLE SERV	ICES, LLC	
	(Name of For	eign Limited Liability Comp	pany)	
Dear Sir or Mada	m:	•		
The enclosed with	ndrawal and fee(s) are submitted	l for filing.		
Please return all c	correspondence concerning this	matter to the following:		
R. RI	ENEE PRENICZN	NY, CFO		
	(Name of Person)			
% URBAN	NATIONAL TITLE S	ERVICES, LLC		
	(Firm/Company)			
202 S. I	MICHIGAN ST.,	SUITE 300		
	(Address)			
SO	UTH BEND, IN			
	(City/State and Zip Code	e)		
For further inform	nation concerning this matter, pl	ease call:		
MAR	K T. MYERS, MANAGER	at (574)	232-5845	
	(Name of Person)	(Area Code & Dayt	ime Telephone Number)	
Registra	T/COURIER ADDRESS: tion Section of Corporations	MAILING ADDRESS: Registration Section Division of Corporations		
Clifton I	Building	P.O. Box 6	P.O. Box 6327	
	ecutive Center Circle see, Florida 32301	Tallahassee	e, Florida 32314	
Enclosed is a che	eck for the following amount:			
<b>★</b> \$25 Filing Fee	\$30 Filing Fee & Certificate of Status	Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy	

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

URBAN NATIONAL TITLE SERVICES, LLC	
(Name of limited liability company)	_
GEORGIA	
(Jurisdiction of its organization)	-
5/10/2016	
(Date registered with Florida Department of State)	-
M16000003758	
(Florida Document Number)	_
This limited liability company is withdrawing its certificate of authority in this state.  (Signature of authorized representative)  MARK T. MYERS, MANAGER	
(Typed or printed name of signee)	

Filing Fee: \$25.00

16 AUG 30 PH 2: 17