

M16000005496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000335403940

19 OCT 22 PM 4:26

20 OCT 22 AM 11:16

OCT 25 2019

M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2019

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: SWAY 2014-1 TRS BORROWER, LLC
Ref. Number: M16000005496

We have received your document for SWAY 2014-1 TRS BORROWER, LLC .
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

Form is for a Dissolution of a Florida LLC. For a Foreign, you need a Withdrawal
form.

If you have any questions concerning the filing of your document, please call
(850) 245-6052.

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 119A00021834

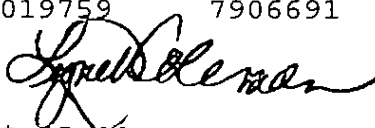
RECEIVED
2019 OCT 24 AM 4:43
DIVISION OF STATE
ALBANY, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 019759 7906691

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : October 22, 2019

ORDER TIME : 3:27 PM

ORDER NO. : 019759-035

CUSTOMER NO: 7906691

FOREIGN FILINGS

NAME: SWAY 2014-1 TRS BORROWER LLC

____ CORPORATE
____ LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF STATUS

CONTACT PERSON: Amanda Robinson - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SWAY 2014-1 TRS Borrower LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Solls

(Name of Person)

Invitation Homes

(Firm/Company)

1717 Main Street, Suite 2000

(Address)

Dallas, Texas 75201

(City/State and Zip Code)

For further information concerning this matter, please call:

Anitra Fludd

(Name of Person)

972

at ()

421-3600

(Area Code & 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 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

2018 OCT 22 AM 11:10

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SWAY 2014-1 TRS Borrower LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

July 7, 2016

(Date registered with Florida Department of State)

M16000005496


(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

Mark Solls. EVP&CLO

(Typed or printed name of signee)

2019 OCT 22 16:11:10

Filing Fee: \$25.00