## F04000005226

(Requestor's Name)		
(Address)		
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(Address)		
(City/State/Zip/Phone #)		
☐ PICK-UP ☐ WAIT ☐ MAIL		
(Business Entity Name)		
(Document Number)		
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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Independent Mortgage Company West Michigan		
(Name of Corporation)		
DOCUMENT NUMBER: F0400005226		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jeri May		
(Name of Person)		
Independent Bank		
(Firm/Company)		
230 W. Main St.		
(Address)		
Ionia, MI 48846		
(City/State and Zip code)		
For further information concerning this matter, please	call:	
Jeri May at (6	616 <sub>)</sub> 522-1869	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Independent Mortgage Company-West Mic	chigan
(Name of Corporation)	
F0400005226	
(Document Number of Corporation (if	known)
The State of Michigan	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affavoluntarily surrenders its authority to transact business or conduct affa	airs within the State of Florida and hereby
This corporation revokes the authority of its registered agent in Fl appoints the Department of State as its agent for service of process batime it was authorized to transact business or conduct affairs in Florid	sed on a cause of action arising during the
The following is a current mailing address for the corporation:	7
230 W. Main St.	08, SECA
(Mailing Address)	WG 28 A RETARY C HASSEE
(City/ State /Zip)	FLORIDA
The corporation agrees to notify the Department of State in the future  (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	of any change in its mailing address.  (Date)
Larry R. Daniel, Jr.  (Typed or printed name of person signing)	(Title of person signing)
(1 yped or printed name or person signing)	( i me oi beison signing)

**FILING FEE \$35**