50000009

| (Re | equestor's Name) | <u>, </u> |
|---|-------------------|--|
| · (Ac | ldress) | |
| (Ac | ddress) | |
| · (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL MAIL |
| (Business Entity Name) | | |
| | | |
| (Document Number) | | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | |
| | | |
| | | |

ľ

Office Use Only



300287781213

07/14/16--01036--006 **35.00

COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|--|---|--|
| SUBJECT: Home Funding C | Corporation | |
| SUBJECT | (Name of Corporation) | |
| DOCUMENT NUMBER: F150000 | 000974 | |
| The enclosed withdrawal application and f | fee are submitted for filing. | |
| Please return all correspondence concerning matter to the following: | this | |
| John Lomen | | |
| | (Name of Person) | |
| Home Funding Cor | poration | |
| | (Firm/Company) | |
| 1820 E Warm Sprir | ngs Road | |
| | (Address) | |
| Las Vegas, NV 891 | 119 | |
| (C | Tity/State and Zip code) | |
| For further information concerning this matt | ter, please call: | |
| Steve Schenkel | at (909)481-2700 | |
| (Name of Person) Enclosed is a check for the amount: | (Area Code & Daytime Telephone Number) | |
| \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (Additional copy is Enclosed) | |
| MAILING ADDRESS: | STREET ADDRESS: | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | |
| P.O. Box 6327 | 2661 Executive Center Circle | |

Tallahassee, FL. 32301

Tallahassee, FL.32314

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

| Home Funding Corporati | on |
|---|---|
| (Name of Co | orporation) |
| F15000000974 | |
| (Document Number of C | Corporation (if known) |
| The State of Nevada | |
| (Incorporated U | Inder Laws of) |
| This corporation is no longer transacting business or covoluntarily surrenders its authority to transact business o | • |
| This corporation revokes the authority of its registered appoints the Department of State as its agent for service the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was authorized to transact business or conductive to the time it was a transactive to | e of process based on a cause of action arising during taffairs in Florida. |
| The following is a current mailing address for the corporation 17888 67TH Court North | |
| (Mailing A | Address) |
| Loxahatchee, FL 33470 | |
| (City/ Sta | te /Zip) |
| The corporation agrees to notify the Department of State (Signature of a director, president or other officer - if in the hand receiver or other court appointed fiduciary, by that fiduciary) | July 11, 2016 |
| Steve Schenkel | AVP |
| (Typed or printed name of person signing) | (Title of person signing) |