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SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

TQ: Registration Section Division of Corporations

SUBJECT: Millenium Home Mortgage L	LC		
	gn Limited Liabi	lity Company)	
Dear Sir or Madam:			
The enclosed withdrawal and fee(s) are submitted	for filing.		
Please return all correspondence concerning this m	natter to the follo	wing:	
Connie Keller			
(Name of Person)			
Millenium Home Mortgage LLC			
(Firm/Company)			
40 Baldwin Road			
(Address)			
Parsippany, NJ 07054			
(City/State and Zip Code)			
For further information concerning this matter, plea	ase call:		
Spence Killam	_{at (} 973	, 402-9112	٠,
(Name of Person)	(Area Co	de & Daytime Telephone Number)	1,

STREET/COURIER ADDRESS:

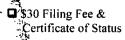
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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



□ \$55 Filing Fee & Certified Copy

■ \$60 Filing Fee, Certificate of Status & Certified Copy

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

Millenium Home Mortgage LLC		
(Name of limited liability company)		
New Jersey		
(Jurisdiction of its organization)		
M050000030Z		
(Florida Document Number)		
This limited liability company is no longer transacting business in Florida and surrende authority to transact business in this state.	ers its	
This limited liability company revokes the authority of its registered agent to accept servitis behalf and appoints the Department of State as its agent for service of process based cause of action arising during the time it was authorized to transact business in Florida.	ce on on a	<u>o</u> .
40 Baldwin Road	11 JUN 23	VISION
(Mailing address)	2	유로.
	_	37,
Parsippany, NJ 07054	建	<u> </u>
(City/State/Zip)		35
	5	
The limited liability company agrees to notify the Department of State in the future of change in its mailing address.	f any	ž
(Signature of member or authorized representative of a member)		
Spence Killam, Dir of Operations (Typed or printed name of signee)		
LLVDEA OF DEIDIEA DAME OF STADERT		

Filing Fee: \$25.00