B02000000290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

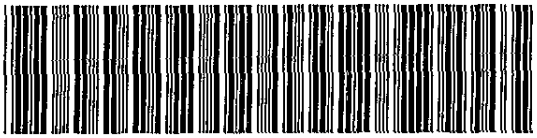
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

10/22 Cancel

B02-290

Office Use Only



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03 OCT 22 AM 9:36

SECRETARY OF STATE
TALLAHASSEE FLORIDA

National City Mortgage

VIA OVERNIGHT DELIVERY

National City Mortgage Co.
3232 Newmark Drive • Miamisburg, Ohio 45
Telephone (937) 910-1200

Mailing Address:
P.O. Box 1820
Dayton, Ohio 45401-1820

October 20, 2003

Secretary of State
409 East Gaines Street
Tallahassee, FL 32399

RE: HomePride Mortgage, LP

Dear Madam or Sir:

Enclosed please find an original executed Certificate of Cancellation for HomePride Mortgage, LP, along with our check for the required fee.

Please record this document in your records returning an original Certificate of Dissolution plus one file-stamped copy of the Articles in the enclosed self-addressed stamped envelope. If there are any extra expenses for the copies, please include a bill for your services.

Please contact me if you have any questions or need additional information. Thank you for your assistance with this matter.

Sincerely,

Lisa Creager

Lisa Creager
Quality Control Administrator/Licensing
National City Mortgage Co.
PHONE (937) 910-4692
FAX (937) 910-2827
E-mail: CreagerL@national-citymortgage.com

CERTIFICATE OF CANCELLATION
FOR

HomePride Mortgage, LP

(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this certificate of cancellation in order to cancel its registration with the Florida Department of State.

(Signature of a General Partner)

John D. Walter, VP of NCMC, Managing Member

(Typed or Printed name of General Partner Signing Above)

STATE OF Ohio

COUNTY OF Montgomery

On this 20th day of October, 2003, John D. Walter personally appeared before me,

- [X] who is personally known to me
- [ ] whose identity I proved on the basis of _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Notary Public Signature

TERESA K. THOMAS, Notary Public
In and for the State of Ohio
My Commission Expires Feb. 10, 2007

Teresa K. Thomas

Notary's Printed Name

Seal

My Commission Expires: 2/10/07