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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: FlexPoint Funding Corporation
(Name of Corporation)
DOCUMENT NUMBER: F01000000369
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ryan Knott
(Name of Person)
FlexPoint Funding Corporation
(Firm/Company)
30 Executive Park, Suite 200
(Address)
Irvine, CA 92614
(City/State and Zip code)
For further information concerning this matter, please call:
Ryan Knott at (949) 910-1939. (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)

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

STREET ADDRESS:
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

FlexPoint Funding Corporation	
(Name of Corporat	ion)
F0100000369	
(Document Number of Corpora	ition (if known)
California	
(Incorporated Under L	aws of)
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders its authority of its registered agent	uct affairs in Florida.
appoints the Department of State as its agent for service of pro time it was authorized to transact business or conduct affairs in	cess based on a cause of action arising during the
The following is a current mailing address for the corporation:	≃1
30 Executive Park, Suite 200	07 / SECR ALLA
(Mailing Addres	FILE U6-7 F TARY OF
(City/ State /Zip	I: 50 TATE ORIOA
The corporation agrees to notify the Department of State in the	future of any change in its mailing address.
(Signature of Silvetion president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	7/26/2007 (Date)
Ryan Knott (Typed or printed name of person signing)	President (Title of person signing)

FILING FEE S35