# FO1000006530

(Requestor's Name)
(Address)
(Address)
(City(Chata/Zin (Dhouse #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETAINT OF STATE



# **COVER LETTER**

TO: Amendment Section	
Division of Corporations	
SUBJECT: FIRST-Rate Mortgage, Inc. of &	10000
(Name of Corporation)	
DOCUMENT NUMBER: F 0 10 0 00 0 4 5 3 0	
The enclosed withdrawal application and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Steve Post	
(Name of Person)	
(Firm/Company)	
2377 Torrell Drive	
(Address)	N
ATTANTA, 6A 30341	
(City/State and Zip code)	
For further information concerning this matter, please call:	
Steve POST at (770, 451-2506	
(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

This corporation is no longer transacting business or conducting affairs within the State of Florvoluntarily surrenders its authority to transact business or conduct affairs in Florida.	rida and hereby
This corporation revokes the authority of its registered agent in Florida to accept service or appoints the Department of State as its agent for service of process based on a cause of action ar time it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	TASE 10
2377 Terrell Drive	FEB 26 ECREVAN
(Mailing Address)	· · ·
Anata GA 30341	PH 2:
(City/ State /Zip)	<b>温温</b> 5
The corporation agrees to notify the Department of State in the future of any change in its mailing	g address.
3/24/10	)
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Date)	
Steve Post Pulle	nt
(Typed or printed name of person signing) (Title of person signing)	ngj

FILING FEE \$35

(Typed or printed name of person signing)