F04000002072

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
	,	

Office Use Only



900193596469

02/14/11--01028--013 **35.00

W



n2-16-11

COVER LETTER

TO: Amendment Section Division of Corporations	•
SUBJECT: The Home Place Mo (Name	of Corporation)
DOCUMENT NUMBER:F04 00000	
The enclosed withdrawal application and fee are so	abmitted for filing.
America's Home (Firm/	1 37
2144 HI/ton (A)	
City/State	<i>GA</i> 30501 and Zip code)
For further information concerning this matter, please on the second sec	se call: 6 18 989-5207 (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

The Home Place Mortgage Co. Af Ga. (Name of Corporation)
F04 00000 2072 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)
(Incorporated Under Laws of) This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.
This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.
The following is a current mailing address for the corporation:
P.O. Box 1316 (Mailing Address)
Gainesville, GA 30503 (City/State/Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address. (Structure of Adjuster of University Adjuster of State in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
Barry Conner President (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35