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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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Roberts FEB 1.0. 2010.

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: PMAC LENding Services, Inc. (Name of Corporation)		
DOCUMENT NUMBER: FOUOOOOO669		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
JESSICA RODRIQUEZ (Name of Person)		
(Name of Person)		
PMac Lending Services, INC		
(Firm/Company)		
15325 Fairfield Ranch Rd. #200		
(Address)		
Chino Hills, Ca 91709		
(City/State and Zip code)		
For further information concerning this matter, please call:		
JESSICA Rodriguez at 909 539-6596		
(Name of Person) (Area Code & Daytime Telephone Number)		

STREET ADDRESS:

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

MAILING 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

PMAC Lending Services, INC.
F0000000009 (Document Number of Corporation (if known)
Caufornia (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 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:
15325 Fair Field Ranch Rd, Ste 200 (Mailing Address)
Chino Hills, Ca 91709 (City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address. (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
(Typed or printed name of person signing) CFO (Title of person signing)

FILING FEE \$35