F06000006830

(Re	equestor's Name)	
(Address)		
, (Ac	ldress)	
(Ci	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
, (Bı	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies Certificates of Status		of Status
Special Instructions to Filing Officer:		
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09/29/08--01012--002 **25.00

12/03/08--01005--008 **10.00

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SECRETARY OF STATE
AHASSEF ELORIDO

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ARST Colory mont Gotte Composition
(Name of Corporation)
DOCUMENT NUMBER:
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person) ARST Colony mintence Corp.
(Firm/Company)
1320 5. 740 E. (Address) (Address) (Address)
(City/State and Zip code)
For further information concerning this matter, please call: John Step 226-7556 (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS. STREET ADDRESS.

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



October 28, 2008

FIRST COLONY MORTGAGE CORP. 1320 S. 740 E. OREM, CT 84097

SUBJECT: FIRST COLONY MORTGAGE CORPORATION

Ref. Number: F06000006830

We have received your document for FIRST COLONY MORTGAGE CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 808A00053041

Carol Mustain Regulatory Specialist II

Division of Cornerations - P.O. ROY 6327 - Tallahassaa, Florida 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 12, 2008

FIRST COLONY MORTGAGE CORP. 1320 S. 740 E. OREM, CT 84097

SUBJECT: FIRST COLONY MORTGAGE CORPORATION

Ref. Number: F06000006830

We have received your document for FIRST COLONY MORTGAGE CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The balance due to file the document is \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 808A00053041

Carol Mustain Regulatory Specialist II

" APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Mast CoLor 9 months (Name of Corporation)	ACR CZPOROTTO
(Name of Corporation)	
(Document Number of Corporation (if known)
- A L	
(Incorporated Under Laws of)	
(Incorporated Order Laws of)	
his corporation is no longer transacting business or conducting affairs wi oluntarily surrenders its authority to transact business or conduct affairs in	
This corporation revokes the authority of its registered agent in Florida ppoints the Department of State as its agent for service of process based or me it was authorized to transact business or conduct affairs in Florida.	a cause of action artsing the
the following is a current mailing address for the corporation:	ARY OF TANKSEE.
1320 5. 740 \mathcal{E} . (Mailing Address) ORE M, ot Prost (City/ State /Zip)	OF STATE
(Mailing Address)	5
OREM OT 84097	•
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any	y change in its mailing address.
Luci	10-20-8
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
JOHN M. HURICH	CE0
(Typed or printed name of person signing)	(Title of person signing)
FILING FEE \$35	