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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850)878-5368

DISSOLUTION OR WITHDRAWAL BAYVIEW MORTGAGE CAPITAL, INC.

| | , |
|-----------------------|---------|
| Certificate of Status | 0 |
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COVER LETTER

| TO: | Amendment Section Division of Corporations | | | |
|-----------------|---|---|--|--|
| SUBJ | ECT: Bayview Mortgage Capital, Inc. | | | |
| | | (Name of Corporatio | n) | |
| DOC | UMENT NUMBER: <u>F09</u> (| 000002095 | | |
| | nclosed withdrawal application and return all correspondence concern | | | |
| | Brian E. Bomatein | | | |
| , | | (Name of Person) | | |
| | Bayview Mortgage Capital, Inc. | | | |
| | (Firm/Company) | | | |
| | 4425 Ponce de Leon Blvd., 5th Floor, Coral Gables, Florida 33146 | | | |
| | (Address) | | | |
| | Coral Gables, Florida 33146 | | • | |
| | (| (City/State and Zip code) | | |
| Par fur | ther information concerning this ma | otter please call | | |
| | s Raymond | • • | 1-5598 | |
| Inclose | (Name of Person) ad is a check for the amount: | (Area Code | e & Daytime Telephone Number) | |
| ⊒ \$ 35∶ | Filing Fee \$\sum \$\\$43.75\$ Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) | ☐\$52.50 Filing Fec. Certificate of Status & Certified Copy (Additional copy is enclosed) | |
| | MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314 |] | STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301 | |

FLQ32 - 05/14/2013 Walters Kinwor Onlina

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

| Bayview Mortgage Capital, Inc. | <u> </u> |
|---|--|
| (Name of Cor | poration) |
| | |
| F09000002095 | |
| (Document Number of Co | rporation (if known) |
| | |
| Maryland (Incorporated Un | ther I mus of |
| (acceptance of | su surre voj |
| This corporation is no longer transacting business or conductarily surrenders its authority to transact business or | |
| This corporation revokes the authority of its registered appoints the Department of State as its agent for service the time it was authorized to transact business or conduct a | of process based on a cause of action arising during |
| The following is a second with a date of the | I |
| The following is a current mailing address for the corporat | ion: |
| 4425 Ponce de Leon Blvd., 5th Floor | |
| (Mailing Add | iro\$#) |
| | |
| Coral Gables, Florida 33146 | |
| (City/State/ | Zip) |
| The corporation agrees to notify the Department of State in | the future of any change in its mailing address. |
| 14-11 | Nov. I, 2012 |
| (Signature of a threeth, president or other officer - If in the hands of a receiver or other court appointed fiduciary, by that fiduciary) | (Date) |
| Brian B. Bomstein | Sr. Vice President |
| (Typed or printed name of person signing) | (Title of purson signing) |
| FILING FEE | - 44 E |
| FILING PER | 4 ЦК.7 ₄ 3 |

FLOJE - 05/14/2017 Wolfers Kithert Online