F-43000001364

	(Requestor's Name)		
·-	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-U	P WAIT	MAIL	
(Business Entity Name)			
	<u></u>		
	(Document Number)		
Certified Copies	Certificates of §	Status	
Special Instructions to Filing Officer:			





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RIA Resign

COVER LETTER

SUBJECT: UNITY REVERSE MORTGAGE COMPANY

(Name of Corporation)

DOCUMENT NUMBER: 993000001364

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBIN MOLT

(Name of Person)

CORPORATION SERVICE COMPANY

(Name of Firm/Company)

80 STATE STREET

(Address)

ALBANY NY 12207

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ROBIN MOLT

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1	
Florida Statutes, the undersigned. CORPORATION SERVICE COMPANY	•
(Name of Registered Agent)	
hereby resigns as Registered Agent for UNITY REVERSE MORTGAGE COI	MPANY
(Name of Corporation)	
F9300001364	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last know	n address.
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.	n which
(Signature of Resigning Agent)	33 17 T
If signing on behalf of an entity:	
ROBIN MOLT	F 1
(Typed or Printed Name)	60
ASST SECRETARY	
(Capacity)	

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314