

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	· · · · · · · · · · · · · · · · · · ·
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bı	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
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08 JAN 28 PH 4: 12

J. BRYAN

JAN 29 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: UNI MONTG! (Name of Fo	Oreign Limited Liability Company)	
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitt	ted for filing.	
Please return all correspondence concerning thi	is matter to the following:	
JAMES V ROSATI		
(Name of Person)		80
(Firm/Company)		08 JAN 28
671 BOSTUN Neck	c fo	54 Hd
NAMAGAN SEH (City/State and Zip Co	RI 02882 (de)	12
For further information concerning this matter, TAMES V ROSAT ((Name of Person)	please call:at ()	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
\$25 Filing Fee \$30 Filing Fee & Certificate of Status	S55 Filing Fee & S60 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

'APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

UNIMORTGAGE LLC		
(Name of limited liability company)		_
DELAWARE		_
(Jurisdiction of its organization)		
This limited liability company is no longer transacting business in Florida and surrence authority to transact business in this state.	lers it	s
This limited liability company revokes the authority of its registered agent to accept servits behalf and appoints the Department of State as its agent for service of process base cause of action arising during the time it was authorized to transact business in Florida.	rice or d on	n a
8647 BAYPINE ROMD JUNE 1	00	
TRUSONVILLE FL 32256 (City/State/Zip)		
The limited liability company agrees to notify the Department of State in the future change in its mailing address.	of an	у
newh		
(Signature of member or authorized representative of a member)	_	Ç
(Typed or printed name of signee)	ر 80	VISE
	JAN 28	25E
	28	FAR CRY
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Filing Fee: \$25.00