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(Reque	stor's Name)	
(Addres	s)	
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(City/St	ate/Zip/Phone #/	
PICK-UP	WAIT	MAIL
· (Busine	ss Entity Name)	
(Docum	ent Number)	·
Certified Copies	Certificates of	Status
Special Instructions to Filin	g Officer:	

A. LUNT

DEC 14 2009

EXAMINER

Office Use Only





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ORIGEN FINANCIAL

27777 FRANKLIN ROAD, SUITE 1700 SOUTHFIELD, MI 48034-8202 USA

TEL: 24 FAX: 2

248.746.7000 248.746.7091

JUANITA MONTAGNE
DIRECT DIAL: 248.746.7033
EMAIL: <u>imontagne@offlc.com</u>

December 9, 2009

VIA FEDEX

Florida Department of State Registration Section Department of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE:

APPLICATION BY FOREIGN LLC FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

Dear Sir/Madam:

Enclosed for filing is the completed **Application by Foreign LLC for Withdrawal of Authority to Transact Business in Florida** for Origen Financial L.L.C. (1 original for State; 1 copy for Origen) and a check in the amount of \$30.00 to cover the filing fee.

If you should have any further questions or require additional information, please do not hesitate to contact me.

Martigue

Sincerely,

Juanita Montagne

∕Énclosures

2009 DEC 11 PH 3: 3

COVER LETTER

• TO: Registration Section Division of Corporations		
SUBJECT: ORIGEN FINANCIAL L.L.C.		
(Name of Fo	oreign Limited Liability Company)	
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitt	led for filing.	
Please return all correspondence concerning thi	is matter to the following:	
Juanita Montagne		200s
(Name of Person)		DEC I
Origen Financial L.L.C.		
(Firm/Company)		DEC II PH 3: 3
27777 Franklin Road, Ste. 1700		<u> </u>
(Address)		
Southfield, MI 48034		
(City/State and Zip Co	de)	
For further information concerning this matter,	please call:	
Juanita Montagne	at (248) 746-7033	
(Name of Person)	(Area Code & Daytime Telephone Number	er)
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	
Enclosed is a check for the following amount	:	
\$25 Filing Fee \$\times\$\$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

ORIGEN FINANCIAL L.L.C.
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent 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 in Florida.
27777 Franklin Road, Ste. 1700
27777 Franklin Road, Ste. 1700 (Mailing address)
Southfield, MI 48034
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of member or authorized representative of amember)
W. ANDERSON GEATER, JRCFO, Treasurer & Secretary

Filing Fee: \$25.00

(Typed or printed name of signee)