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(Re	equestor's Name)	
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COVER LETTER

#			
TO: Registration Section Division of Corporations	· - ·		
SUBJECT: Quantum Settleme	ent Services. HC		
SUBJECT: Ouantum Settleme (Name of Foreign Limite	d Liability Company)		
Description of the second			
Dear Sir or Madam:			
The enclosed withdrawal and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the	ne following:		
Deborah Hunter (Name of Person)	· · · · · · · · · · · · · · · · · · ·		
Waterfield Mortgage (Firm/Company)	Company		
7500 W. Jefferson (Address)	Blvd.		
Fort Wayne, IN 46804 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Deboral Hunter at (260 435-5018 Area Code & Daytime Telephone Number)		
(Name of Person)	Area Code & Daytime Telephone Number)		
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:			
	ing Fee & \$\infty\$\$ \$60 Filing Fee, d Copy Certificate of Status & Certified Copy		

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

Quantum Settlement Services, LLC (Name of limited liability company)
Indiana (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.
7500 W. Tefferson Blvd. (Mailing address)
Fort Wayne, IN 46804 (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 a member) Deborah K Hunter (Typed or printed name of signee)

Filing Fee: \$25.00