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EXAMINER

2010 APR 19 PM 1: 01

COVER LETTER

TO:

TO: Registration Division of	n Section Corporations				
SUBJECT: USA	Mortgage Funding, L		(Commont)	······································	
	(Name of For	reign Limited Liability	y Company)		
Dear Sir or Madam:					
The enclosed withdr	awal and fee(s) are submitte	ed for filing.			
Please return all corr	respondence concerning this	matter to the followi	ng:		
Roselea Payne					
	(Name of Person)				
USA Mortgage	Funding, LLC				
	(Firm/Company)	,	_		
1310 RR 620 S	South #C15				
	(Address)			-1 N	
Austin, TX 787			<u>_</u>	2010 APR 19 SECRETARY TALLAHASSE	****
	(City/State and Zip Cod	le)		ETA ETA	Total A
For further informati	on concerning this matter, p	olease call:		9 PM	
Roselea Payne	:	_{at (} 512	, 261-7500	STATE	C
	ame of Person)		& Daytime Telephone Number)		
Registration Division of Clifton Buil 2661 Execu	Corporations	Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314		
Enclosed is a check	for the following amount:				
□ \$25 Filing Fee	\$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy		

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

USA Mortgage Funding, LLC	
(Name of limited liability company)	
(Jurisdiction of its organization)	
MO3000004292	
(Florida Document Number)	
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.	
1310 RR 620 South #C15	
(Mailing address) Austin TV 79734	
	T
Austin, TX 78734	Carrieries FREFEREN
(City/State/Zip)	- Constitution of the last of
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.	にコ
Kullen Pupe	
(Signature of member or authorized representative of a member)	
Roselea Payne	
(Typed or printed name of signee)	

Filing Fee: \$25.00