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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	
(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) (PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: L. SELLERS APR 1 6 2008	(Requestor's Name)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: L. SELLERS APR 1 6 2008	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: L. SELLERS APR 1 6 2008	(Address)
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: L. SELLERS APR 1 6 2008	(City/State/Zip/Phone #)
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: L. SELLERS APR 1 6 2008	PICK-UP WAIT MAIL
Certified Copies Certificates of Status Special Instructions to Filing Officer: L. SELLERS APR 1 6 2008	(Business Entity Name)
Certified Copies Certificates of Status Special Instructions to Filing Officer: L. SELLERS APR 1 6 2008	
Special Instructions to Filing Officer: L. SELLERS APR 1 6 2008	(Document Number)
L. SELLERS APR 1 6 2008	Certified Copies Certificates of Status
	L. SELLERS APR 1 6 2008

Office Use Only



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SECRETARY OF STATE

FILED

COVER LETTER .

Division of Corporations
SUBJECT: Universal Capital Mortgage, L.L.C.
(Name of Foreign Limited Liability Company)
Dear Sir or Madam:
The enclosed withdrawal and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
E. H. Clem
(Name of Person)
SunTrust Lender Management, L.L.C. (Firm/Company)
901 Semmes Avenue MTG 1815 (Address)
Richmond, VA 23224 (City/State and Zip Code)
For further information concerning this matter, please call:
E. H. Clem at (804) 291-0320 (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:
\$25 Filing Fee \$\ \tag{\$55 Filing Fee & \tag{\$60 Filing Fee,}}\$\$ Certificate of Status Certified Copy Certified Copy Certified Copy

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

Turn Key Lending, 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.
c/o SunTrust Lender Mgmt, LLC, 901 Semmes Ave MTG 1815 (Mailing address)
Richmond. VA 23224 (City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address. (Signalure of member or authorized representative of a member)
David F. Robinson. Manager (Typed or printed name of signee)

Filing Fee: \$25.00

2008 APR IL PM 1: 02 SECRETARY OF STATE TALL AHASSEF, FLORIDA

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