Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 205-8842 Fax Number : (850)878-5368

## LLC DISSOLUTION OR WITHDRAWAL OCWEN NONPERFORMING LOANS, LLC

Certificate of Status		
Certified Copy	0	
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## **COVER LETTER**

	ision of C	Corporations		
SUBJECT:	Ocwe	n Nonperforming Los	ans, LLC	
00202011		(Name of For	elgn Limited Liability	Company)
Dear Sir or N	Madam:			
The enclosed	d withdray	val and foc(s) are submitted	d for filing.	
Please return	all corre	spondence concerning this	matter to the following	<b>G</b>
Lynn Alm	eida			
		(Name of Person)		-
Ocwen F	inancia	l Corporation		
		(Firm/Company)		•
1661 Wo	rthingto	n Road		
		(Address)	<del></del>	-
West Pal	m Bead	ch, <b>FL 3348</b> 6		
		(City/State and Zip Cod	e)	•
For further is	nformatio	n concerning this matter, p	lease call:	
Lynn Alm	eida		5 <b>61</b>	<b>682-8954</b>
	(Naz	ne of Person)		Daytime Telephone Number)
Reg Div Clii 266	gistration rision of C Ron Build 1 Executi	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is	u check f	or the following emount:		
C \$25 Filing	g Fee	☐ \$30 Filing Fee & Centificate of Status	Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Ocwen Nonparforming Loans, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
12/18/2007
(Date registered with Florida Department of State)
M07000007364
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
By: Ocwen Financial Corporation, Member  (Signature of authorized representative)  Lynn Almelda, Assistant Secretary of Ocwen Financial Corpo
(Typed or printed name of signee)

Filing Fee: \$25.00

FILED

15 JUN 19 AH 7: 15

SECRETARY OF STATE
ALLAHASSFE, FLORIDA