## M08000007884

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## **COVER LETTER**

TO:

Registration Section

Division of Corporations
SUBJECT: GCM MORTGAGE LLC (Name of Foreign Limited Liability Company)
(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:
LAUTA A. CARAOTTA (Name of Person)
GCM MORTGAGE LLC (Firm/Company)
221 SE 24th ST (Address)
Cape Cosat, Ft. 33990 (City/State and Zip Code)  For further information concerning this matter, please call:
LAURH A CAPACTTA— at (239) 233-1795 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:
S25 Filing Fee \$\ \times \text{\$30 Filing Fee & Certificate of Status} \text{\$\subseteq \text{\$55 Filing Fee & Certificate of Status & Certificate of Status & Certificate Opy} \text{\$\subseteq \text{\$\subseteq \text{\$60 Filing Fee, Certificate of Status & Certificate Opy}} \$\subseteq \text{\$\subseteq \seteq \text{\$\subseteq \seteq \seteq \text{\$\subseteq \seteq \seteq \seteq \text{\$\subseteq \seteq \seteq \seteq \seteq \seteq \seteq \seteq \seteq \text{\$\subseteq \seteq

Division of Corporations

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SECRETARY OF STATE PALLAHASSEE, FLORIDA

September 11, 2013

6 May . 1

LAURA A CARAOTTA 221 SE 24TH ST CAPE CORAL, FL 33990

SUBJECT: GCM MORTGAGE LLC Ref. Number: M08000001884

We have received your document for GCM MORTGAGE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LIMITED LIABILITY COMPANY, but your entity is a FOREIGN LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 913A00021316

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

(Name of limited liability company)
(
(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.
221 SE 244h ST (Mailing address)
(Mailing address)
CAPE COTAL FC 33980
(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)
,
LAUGA A CARAOTTA
(Typed or printed name of signee)
型

Filing Fee: \$25.00

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