## M11000006132

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SECREFACTOF STATE ALLAHASSEE, FLORIDA

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B FIGUEROA MAY 0 4 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 193430 7387459 AUTHORIZATION COST LIMIT ORDER DATE : May 3, 2018 ORDER TIME : 2:11 PM ORDER NO. : 193430-060 CUSTOMER NO: 7387459 FOREIGN FILINGS NAME: BOF-IIB REO, LLC \_ CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY \_\_\_\_ PLAIN STAMPED COPY \_\_\_ CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Emily Croft - EXT# 62925

## **COVER LETTER**

	gistration Servision of Cor			
SUBJECT:	BOF-IIb	REO, LLC		
Sommer.		(Name of For	eign Limited Liability	Company)
Dear Sir or !	Madam:			
The enclose	d withdrawa	I and fee(s) are submitted	f for tiling.	
Please return	n all correspo	ondence concerning this	matter to the following	u.
Brian E.	Bomstein			
		(Name of Person)		-
Bayview	Asset Ma	inagement, LLC		
		(Firm/Company)		
4425 Poi	nce de Le	eon Blvd., 5th Fl.		_
		(Address)		
Coral Ga	ables, FL	33146		
		(City/State and Zip Code	<del>e)</del>	-
For further i	ntormation (	concerning this matter, p	lease call:	
Christine	Raymon	d	305	341-5598
	(Name	of Person)		Daytime Telephone Number)
Rej Div Cli 266	gistration Se vision of Cor fton Buildin	rporations 8 : Canter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is	a check for	the following amount:		
🗅 \$25 Filin	g Fec C	2 \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

BOF-IIb REO, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
Dec. 7, 2011
(Date registered with Florida Department of State)
M11000006132
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
Brian E. Bomstein
(Typed or printed name of signee)

Filing Fee: \$25.00