

m12000005797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

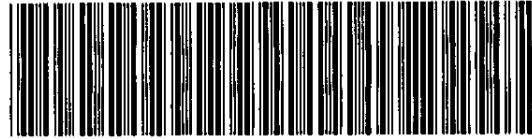
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2016 APR-4 A 9:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**DATE: 4/4/16**

**NAME: PILGRIM MORTGAGE LLC**

**TYPE OF FILING: WITHDRAWAL**

**COST: 25.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pilgrim Mortgage LLC  
(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:

Michelle Williams

(Name of Person)

Pilgrim Mortgage LLC

(Firm/Company)

1270 N. Loop 1604 E., Suite 100

(Address)

San Antonio, TX 78232

(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Williams

(Name of Person)

210

at ( )

499-4200

(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

☐ \$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

Pilgrim Mortgage LLC

(Name of limited liability company)

Texas

(Jurisdiction of its organization)

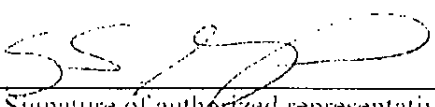
10/15/2012

(Date registered with Florida Department of State)

M12000005797

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

  
(Signature of authorized representative)

Scott Bishop

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED  
2016 APR -4 A 9:05  
CLERK OF STATE  
TALLAHASSEE, FLORIDA