P01630

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: GMAC MORTGAGE GRO	UP, INC.
	Name of Corporation)
DOCUMENT NUMBER: P07630	
The enclosed withdrawal application and fee	are submitted for filing.
Please return all correspondence concerning th matter to the following:	is
Cory Lehman	
1)	Name of Person)
GMAC RESCAP	
(Firm/Company)
One Meridian Crossings, Ste. 10	00 MC-03-04-60
	(Address)
Minneapolis, MN 55423	
	/State and Zip code)
For further information concerning this matter,	, please call:
Cory Lehman	at (952) 857-6757
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Amendment Section	MAILING ADDRESS: Amendment Section
Division of Companyions	Division of Comparations

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

GMAC MORTGAGE GROUP, INC.	
(Name of Corporation)	
P07630	
(Document Number of Corporation (if known)	
Michigan	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs within the State of Florida and h voluntarily surrenders its authority to transact business or conduct affairs in Florida. This corporation revokes the authority of its registered agent in Florida to accept service on its behal appoints the Department of State as its agent for service of process based on a cause of action arising durin time it was authorized to transact business or conduct affairs in Florida. The following is a current mailing address for the corporation: One Meridian Crossings, Ste. 100 MC-03-04-60 (Mailing Address) Minneapolis, MN 55423	lf and
(City/ State /Zip)	(1) (1)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.	5
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)	_
Donna DiCicco Assistant Secretary	
(Typed or printed name of person signing) (Title of person signing)	_

FILING FEE \$35