F02000001735

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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RAJON.

26-14

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: 1-800-EAST-WEST MORTGAGE COMPANY

(Name of Corporation)

DOCUMENT NUMBER: F02000001735

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brenna Lutter

(Name of Person): 1 Profit or 19:0ff) at the performe of (Name of Firm/Company)

8040 Excelsior Dr Ste 200

(Address)

Madison, WI 53717

(City/State and Zip Code)

For further information concerning this matter, please call:

Brenna Lutter

_{at} 608 \ 827-7622

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

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

Mailing Address:

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 63	17.1509,
Florida Statutes, the undersigned, Business Filings Incorporated	
(maine of Registered Agent)	
hereby resigns as Registered Agent for 1-800-EAST-WEST MORTGAGE (Name of Corporation)	COMPANY
(Name of Corporation)	
F02000001735	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last k	nown address.
The agency is terminated and the office discontinued on the 31st day after the dath this statement is filed.	ite on which
Bundhutter to meeff) at the approprie of the approprie of the appropries of the appr	<u>-</u> -
If signing on behalf of an entity:	
Brenna Lutter	_
(Typed or Printed Name)	
Asst. Secretary	
(Capacity)	
	68 24 15 24 16 16 16 16 16 16 16 16 16 16 16 16 16
Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/voluntarily dissolved/voluntarily dissolved/voluntarily dissolved/voluntarily dissolved/voluntarily disso	#: 5 lved/ &

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314