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Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE,

Account Number : 073222003555 Phone : (561)686-3307 Fax Number : (561)471-0894

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Enail Address: MANAGAS

REGISTERED AGENT RESIGNATION LIBERTY HOME LOANS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00
	\$25.00

5.00 C. LEWIS

DEC 2 3 2009

EXAMINER

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Corporate Filing Menu

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 608.416(2) or 6	508.509, Florida Statutes, the undersigned,
,	Gary N. Gerson	, hereby resigns as
	Name of Registered Agent	
Registered Agent for _	Li	berty Home Loans, LLC
	Name of Limited Lie	ability Company
L0306	00042185	
Document 1	Number, if known	
		isted limited liability company at its last known address. d on the 3 st day after the date on which this statement is filed.
The agency is termina	A_ N	bure of Resigning Agent
If signing on behalf of	an entity:	•
	Gary 1	N. Gerson
	Typed or	Printed Name
	Свр	acity

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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