

LO5 000023741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

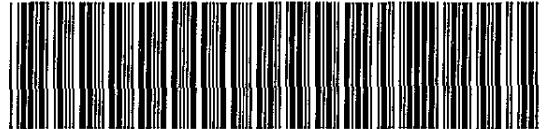
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LO5-23741

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06 MAR 21 AM 11:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Oulican MAR 21 2006



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 1, 2006

SHARLYN DAVIS  
1551 FORUM PLACE  
SUITE 400 D  
WEST PALM BEACH, FL 33401

SUBJECT: MORTGAGE SOLUTIONS, LLC  
Ref. Number: L05000023741

We have received your document for MORTGAGE SOLUTIONS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong forms were submitted.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 806A00014330

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:**

MORTGAGE SOLUTIONS, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHARLYN DAVIS

(Name of Person)

MORTGAGE SOLUTIONS, LLC

(Firm/Company)

1551 FORUM PLACE #400 S

(Address)

WEST PALM BEACH, FL 33401

(City/State and Zip Code)

For further information concerning this matter, please call:

SHARLYN DAVIS

(Name of Person)

at (561) 296-4904

(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

☐ \$55 Filing Fee &  
Certified Copy

CR2E079 (3/05)

*Check sent already for \$35<sup>00</sup>*



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER**

I, ANDREW LUCHE, hereby resign as MANAGING MEMBER  
(Title)  
of MORTGAGE SOLUTIONS, LLC,  
(Limited Liability Company)  
a limited liability company organized under the laws of the State of FLORIDA  
and affirm that the limited liability company has been notified in writing of the resignation.

[Signature]  
(Signature of resigning manager, managing member or member)

**FILING FEE IS \$25.00**

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

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