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O6 AUG 25 AM II: 48

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Lynk Mortgage Group, UC (Name of Limited Mability 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:
Ralph Penone (Name of Person)
(Name of Person)
Lynh Matgage Guy
(Firm/Company)
585 N. Cowlengy Pluny 7301
MevnH Fs FL 32953 (City/State and Zip Code)
For further information concerning this matter, please call:
Rath Pewore at (321) 452-9838 (Name of Person) (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 \$\times \text{Certified Copy}\$ CR2E079 (8/05)



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I,	John	Finger	, he	reby resign as	Managing (Title)	Member
of		Lynle	Morfgage (Limited Liability Cor	Group,	LCC	,
a limited	d liability comp	any organized	d under the laws of	the State of _	Florida	
and affii	rm that the limi	ted liability co	ompany has been no	otified in writi	ng of the resignat	ion.
	(Signa	ture of resign	ing manager, mana	ging member o	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