# L05000071239

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(De	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Office
Mgr. L	
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08/16/06--01030--023 \*\*25.00

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Meritage Financial Group, 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 filin
Please return all correspondence concerning this matter to the following:
Tesa R Free (Name of Person)
Meritage Financial Group, LLC (Firm/Company)
3353 S. F. 18 <sup>th</sup> Ave. (Address)
Cape Coral, FL 33904 (City/State and Zip Code)
For further information concerning this matter, please call:
Tesu R. Free at (239) 822-2272 (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{CR2E079 (8/05)} \text{\$55 Filing Fee & Certified Copy}



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Anthony V. Free , hereby resign as Manager Member (Title)
of Meritage Financial Group, LLC, (Limited Liability Company)
a limited liability company organized under the laws of the State of,
and affirm that the limited liability company has been notified in writing of the resignation.
Inthony V. Free
(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

SECRETARY OF STATE DIVISION OF CORPORATION