

LOS 000 120100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

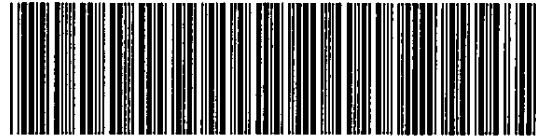
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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Latitude Lending Group LLC  
(Name of Limited Liability Company)

TAX ID # 20-3950989

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:

Chris Paradis

(Name of Person)

Latitude Lending Group LLC

(Firm/Company)

2828 Clark Road Suite 8

(Address)

Sarasota, FL 34231

(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Paradis

(Name of Person)

at ( 866 ) 802-7852

(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

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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

I, Christopher Paradis, hereby resign as Partner McGEM  
(Title)

of latitude Lending Group,  
(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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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