	Requestor's Name)	
(	Address)	
• (	Address)	
	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
. (	Business Entity Name)	
(Document Number)		
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12/29/06--01014--009 \*\*55.00

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Sun Mortgage Company, LLC (Name of Edmitted Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Perkeith Clayborn (Contact Person)
Sun Mortgage Company, LLC
5545 Myray Rd. Ste. 206
Memphis 1 38119 (City/State and Zip Code)
For further information concerning this matter, please call:
Per keith (1gyborn at (901) 331-6090 or (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee \$ Certified Copy
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

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	ited liability company as it appears on the records of the Florida Department on Mortgage Company, LLC.
2. This limited liability	company was organized under the laws of:
3. The Florida docume	nt/registration number of this limited liability company is:
(Print Name	hereby resign as a <u>nember</u> by Person Resigning), hereby resign as a <u>nember</u> (Print Title)  y company and affirm the limited liability company has been notified of my
Signature of Resigni	ng Member, Managing Member or Manager
· ·	\$25.00 (Required) \$30.00 (Optional)

CR2E079 (5/06)