

L06000101646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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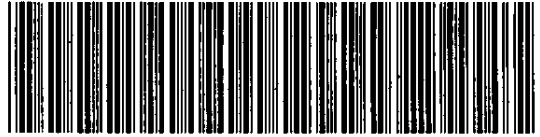
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. O'Connell NOV 24 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lincoln Lending Services, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: LO6 000101644

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frank Smith
Name of Person

Infante, Zumpano, Hudson + Miloch, LLC
Name of Firm/Company

500 S. Dixie Highway, Suite 302
Address

Coral Gables, FL 33146
City/State and Zip Code

giselle.ortizdelamo@izhmilaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank Smith at (305) 503 2990
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Rita - M Gomez, hereby resigns as
Name of Registered Agent

Registered Agent for Lincoln Lending Services, LLC.

Name of Limited Liability Company

LOW000101646
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Rita Gomez
Signature of Resigning Agent

If signing on behalf of an entity:

Rita Gomez
Typed or Printed Name
Registered Agent
Capacity

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TALLAHASSEE, FLORIDA

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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