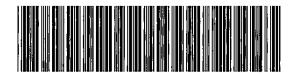
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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(00	cument Number)	
	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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2007 JUN 11 PH 12: 23
SECRETARY OF STATE

Of

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Ashford Mortgage Services (Name of Limited Liability Com	LLC pany)
The enclosed member, managing member or manager resign filing.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Luis J. Gonzalez (Contact Person)	
Ashford Mortgage Services LLC (Firm/Company)	
550 N. Bynby ave #220 (Address)	2007 JUNI 1 PH 12: 23 SECRETARY OF STATE TALLAMASSEE, FLORIDA
Orlando, F1, 32803 (City/State and Zip Code)	A PH
For further information concerning this matter, please call:	STATE LORIDA
Luis Gonzalez at (407 (Name of Contact Person) (Area Code) 898 - 4979 & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$\$	Department of State for: S55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
	· · · · · · · · · · · · · · · · · · ·

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	imited liability company as it	• •	•	
	lity company was organized u			
	ment/registration number of t	•	any is:	
4. 1, Rael Held	nsn me of Person Resigning)	, hereby resign as a	Member (Print Title)	
resignation in wri	ility company and affirm the ling.		has been notified SECRETARY OF STATE TALLAHASSEE, FLORIDA	p. Sc., minerally of the control of
	\$25.00 (Required) \$30.00 (Optional)		PH 12: 23 OF STATE E. TLORIDA	1