L07000026510

(R	equestor's Name)		
(Address)			
	ddress)		
(^י	udiess)		
(C	ity/State/Zip/Phone i	¥)	
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Name)	
(Document Number)			
Certified Copies	Certificates o	of Status	
Special Instructions to Filing Officer:			

Office Use Only



200263661282

200263661282 09/11/14--01018--003 **55.00

80/m8/m 09/17/14

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Sunvest Mortgage Group, LLC			
(Name of Limited Liabili	ty Company)		
The enclosed member, resignation or dissociation and	fee(s) are submitted for filing.		
Please return all correspondence concerning this matter	er to:		
Timothy L Watts			
(Contact Person)			
Sunvest Mortgage Group, LLC			
(Firm/Company)			
12794 Forest Hill Blvd S#29			
(Address)			
Wellington, FL 33414			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Timothy L Watts 561	337-4848		
(Name of Contact Person) (Area	Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Flor □ \$25 Filing Fee \$55 F	ida Department of State for: 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		
Tallahassee, Florida 32301	,		

CR2E079 (2/14)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as vest Mortgage Group, LLC	s it appears on the records of the Florida Department
2. The Florida docu	ment/registration number a	ssigned to this limited liability company is:
L07000026510)	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is:
4. I, Carla V Capp	pelia P.A.	, hereby withdraw/resign as a
(Print No	ame of Person Resigning)	
Managing Me	mber	
	(Print Title)	
of this limited lial resignation in wri	• •	ne limited liability company has been notified of my
Mala	D Coor	l-
Signature of Di	ssociating Member or Resig	ning Manager
	•	
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	