## L08000066668

(Re	equestor's Name)				
(Ac	ldress)				
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(Ci	ty/State/Zip/Phone	#)			
. PICK-UP	☐ WAIT	MAIL			
•					
. (Bı	usiness Entity Name	e)			
. (Document Number)					
Certified Copies	_ Certificates	of Status			
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D. BRUCE

NOV 19 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: National Mortgage Auditing Group (Name of Limited Liability Com	) L.L.C
,	•
The enclosed member, managing member or manager resignifiling.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Cathy Gellatly	_
(Contact Person)	
National Mortgage Auditing Group L.L.C	
(Firm/Company)	O8 SEC
1200 S. Rogers Circle Suite 3	100 NO
(Address)	TIE SSEE
Boca Raton, Fl 33487	PILED B MOV 18 PM 2: 32 CRETARY OF STATE LAHASSEE, FLORIDA
(City/State and Zip Code)	741
For further information concerning this matter, please call:	
Cathy Gellatly 954	3 816-9148 & Daytime Telephone Number)
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$\$	repartment of State for:  55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, 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

	nited liability company as it a		s of the Florida	a Department
2. This limited liability Florida State	y company was organized un	nder the laws of:		08 NOV 1 SECRETARI ALLAHASSE
3. The Florida docume	ent/registration number of th	is limited liability con 	npany is:	W 18 PM 2: 32 ARY OF STATE SSEE, FLORIDA
<sub>4. I,</sub> Nancy Mans	our	_, hereby resign as a	Managing	g Member
	e of Person Resigning) ty company and affirm the li		(Print T	Title)
Namey Signature of Resigni	Mansour ing Member, Managing Men	nber or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			