Florida Department of State

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To:

Division of Corporations

Fax Number (850) 617-6383

Account Name : GREEN SCHOENFELD & KYLE LLP

Account Number : I20000000177

Phone

Fax Number

: (239)936-7200 : (239)936-7997

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Loss Mitigation Counseling Services, LLC	I AN ERING
2. This limited liability company was organized under the laws of: Florida 75 Florida 75 Florida	4.75
3. The Florida document/registration number of this limited liability company is: L08000093669	•
4. I, Clarence E. Solloway hereby resign as a Member/MGRM (Print Name of Person Resigning) (Print Title) of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. 10/7/09	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	