

LD9000028626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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JUN - 4 2009

EXAMINER



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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUN - 3 PM 1:49

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REO DISPOSITIONS, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHEN ANDREW HARRISON

Name of Person

REO DISPOSITIONS, LLC

Firm/Company

880 5TH STREET NW

Address

NAPLES, FL 34120

City/State and Zip Code

S_HARRISON@COMCAST.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHEN ANDREW HARRISON

Name of Person

at (239)

821-5180

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

REO DISPOSITIONS, LLC

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

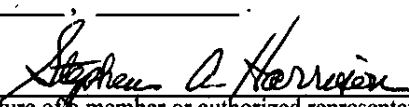
MGR = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|------------------|-----------------------|--------------------------------------------|
| MGRM | ROBERT VIGLIOTTI | 5782 HAMMOCK ISLES DR | <input type="checkbox"/> Add |
| | | NAPLES, FL 34108 | <input checked="" type="checkbox"/> Remove |
| | | | |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____



Signature of a member or authorized representative of a member

STEPHEN ANDREW HARRISON

Typed or printed name of signee

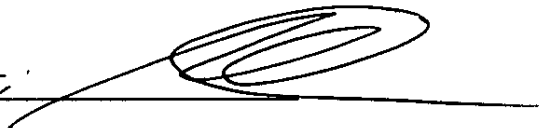
REO DISPOSITIONS LLC
880 5th Street NW Naples, FL 34120

May 22, 2009

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: Officer Resignation

In accordance with the rules of the Florida DBPR Division of Real Estate, I, Robert
Vigliotti, resign as an officer of REO Dispositions LLC

By Robert Vigliotti 

Date 5/26/09

Cc: Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301