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SECRETARY OF STATE
SIVISION OF CORPORATIONS

T. HAMPTON

OCT 2 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Home Loan Defense, LLC Name of Limited Liability Company
DOCUMENT NUMBER: <u>L 09 0 0 0 0 4 & 10 6</u>
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Scott J. Wortman Name of Person
Kovte & Wortman P.A. Name of Firm/Company
Address West Palm Beach, Ti 33411 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Scott Wortman at (561) 228-6200 Name of Person at (561) Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

STREET ADDRESS:

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



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	e limited liability				da Department
2. This limited lial		as organized un	der the laws of:		
3. The Florida doc	cument/registratio		s limited liability _·	y company is:	
4.1, By 10	in to te Name of Person Resi	gning)	_, hereby resign	as a Manag	in Menber
	bility company a				
Signature of Res	signing Member,	Managing Mem	ber or Manager	•	
Filing Fee: Certified Copy:	\$25.00 (Requ \$30.00 (Option	,			SECI SECI SECI SECI SECI SECI SECI SECI

CR2E079 (5/06)

SECRETARY OF STATE STORE OF CORPORATIONS