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EXAMINER



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SECRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

то:	P: Registration Section Division of Corporations			
SUBJ	ECT:	MAPG Partners, LLC.		
		(Name of Limit	ed Liability Company)	
The er filing.	iclosed	I member, managing member or r	nanager resignation and fee(s) are submitted for	
Please	return	all correspondence concerning the	nis matter to:	
Pete	r J G	Broenendijk		
		(Contact Person)		
Mort	gage	Asset Preservation Gro	up, LLC	
		(Firm/Company)		
4248	3 Tov	vn Center Blvd. Suite 3		
		(Address)		
Orlai	ndo,	FL 32837		
		(City/State and Zip Code)		
For fu	rther in	nformation concerning this matter	, please call:	
Pete	r J G	roenendijk	<sub>at (</sub> 407 <sub>)</sub> 888-2337	
	(N	ame of Contact Person)	at ( 407 ) 888-2337 (Area Code & Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payable to	the Florida Department of State for:	
		\$25 Filing Fee	\$55 Filing Fee &	
			Certified Copy	
		OURIER ADDRESS:	MAILING ADDRESS:	
_		Section	Registration Section	
		Corporations	Division of Corporations	
Cliftor		ling ive Center Circle	P.O. Box 6327	
		Florida 32301	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

	limited liability company as i PG Partners, LLC.	t appears on the records of th	ne Florida Department
of State is:	1 0 1 0101010, 220.		•
2. This limited liab State of Flo	ility company was organized orida	under the laws of:	
3. The Florida docu L10000021	ument/registration number of	this limited liability company	y is:
4. I, TH-USA, I	nc.	, hereby resign as a MC	BR
(Print N	ame of Person Resigning)		(Print Title)
	oility company and affirm the	limited liability company ha	s been notified of my
resignation in wri	ting.		
Signature of Jesi	gning Member, Managing Me	ember or Manager	عد ا
Filing Fee:	\$25.00 (Required)		9
	\$30.00 (Optional)		<b>5</b> 5

CR2E079 (5/06)

DIVISION OF CORPORATIONS