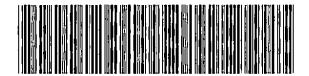
L24000 140838

(Requestor's Name)
(Address)
(Address)
(Address)
(0) (0) (17 (10) (2 (4)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consideration of Ether Officers
Special Instructions to Filing Officer:

Office Use Only



000433617320

07/24/24--61013--310 **25.00



COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: CTC Mortgage Processin	g Partners LLC
Name of Limited Liability	y Company
DOCUMENT NUMBER: L24000140838	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
United States Corporation Agents, Inc.	
Name of Person	-
Legalzoom.com, Inc.	
Name of Firm/Company	_
9900 Spectrum Dr.	_
Address	
Austin, TX 78717	
City/State and Zip Code	-
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	=
For further information concerning this matter, please call:	
at (773-0888
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

STREET ADDRESS:

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.011	5, Florida Statutes, the unde	ersigned,			
United States Corpo	oration Agents, In	ıc.	, hereby resigns as			
	Name of Registered Age		, thereby resigns as			
Registered Agent for C	TC Mortgage Pro	cessing Partners LLC				
	N	To 11 thirty Course	· · · · · · · · · · · · · · · · · · ·			,
	Name of Lim	nited Liability Company				
L24000140838						
Document Nu	mber, if known					
A copy of this resignation	on was mailed to the a	above listed limited liability	company at its last kn	own ad	dress.	
The agency is terminated	d and the office disco	ontinued on the 31st day afte	er the date on which th	is stater	nent is	filed.
	Trik	Treutlein				
		Signature of Resigning Agent				
If signing on behalf of a	n entity:		5	F	20	
	Erik Treutlein		Î	= '	2 4	
	T	yped or Printed Name		E.	Ē	
	Vice President on beha	alf of United States Corporation A	Agents, Inc.	XSS.	24	-
		Capacity		m,	₽	[];
				TALL AHASSEE FLORIDA	2024 JUL 24 PH 4: 43	
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability condition Administratively dissolve withdrawn limited liabil	ompany ed/ voluntarily dissolv	77	ັພ	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314