P00000050078

(Requestor's Name)				
(Address)				
·				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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(Document Number)				
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TALLAHASSEE, FLORIDA

DD/Res

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: The Mortgage	Solution Center, Inc.
		(Name of Corporation)
DOCU	JMENT NUMBER: PO	0000050078
The en	closed Officer/Director Resign	nation for a Corporation and fee are submitted for filing.
Please	return all correspondence cond	cerning this matter to the following:
Ţ	Douglas C. Kent (Name of Person	
	(Name of Person	n)
	The Mortgage Solutio (Name of Firm/Com	n Center, INc.
1		1
	(Address)	
F	Port St. Lucie, FL (City/State and Zip)	34953
	(City/State and Zip C	Code)
For fur	ther information concerning th	is matter, please call:
D	Oouglas C. Kent	at (772) 340-4003 (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclos	ed is a check for \$35.00 made	payable to the Florida Department of State.
Amend Divisio Clifton 2661 E	lment Section on of Corporations Building	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Sandra E. Kent	, hereby resign as_	Vice President		
			(Title)		
of	The Mortgage Solution Cen				
	(Name of Corporation)				
	P0000050078 ,a corp	oration organized un	der the laws of the State of		
	(Document Number, if known)				
	Florida				

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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

SEPRETARY OF SINGS