

P010000044784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

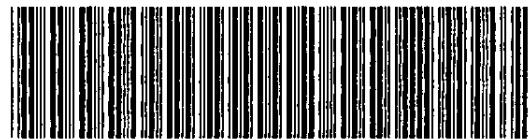
PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

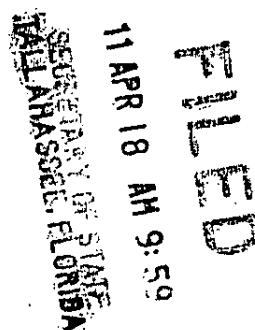
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Op/200 Resp



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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CAPITALPlus Mortgage & Underwriting Services, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P01000044784

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rene O. Baril

(Name of Person)

CAPITALPlus Mortgage & Underwriting Services, Inc.

(Name of Firm/Company)

1337 S. International Parkway

(Address)

Lake Mary, Florida 32746

(City/State and Zip Code)

For further information concerning this matter, please call:

Rene O. Baril

at (407) 333-4529

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**

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

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

11 APR 18 AM 9:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Darcy L. Baril, hereby resign as Treasurer/Secretary  
(Title)

of CAPITALPlus Mortgage & Underwriting Services, Inc.  
(Name of Corporation)

P0100004478 4 a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Darcy Baril

(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

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

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