

P05000047914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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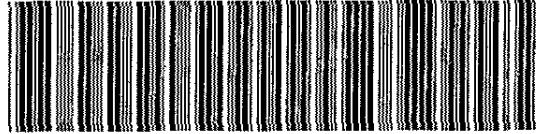
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: YOUR NEIGHBORHOOD MORTGAGE INC
(Name of Corporation)

DOCUMENT NUMBER: P05000047914

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

Please return all correspondence concerning this matter to the following:

SONIA GONZALEZ
(Name of Person)

YOUR NEIGHBORHOOD MORTGAGE, INC
(Name of Firm/Company)

2450 SW 137 AVE SUITE #201
(Address)

MIAMI FL. 33125
(City/State and Zip Code)

For further information concerning this matter, please call:

Sonia Gonzalez at (305) 554-6005
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

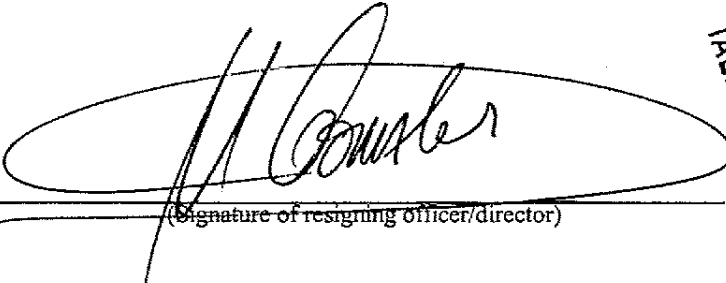
Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, C. U. GONZALEZ, hereby resign as V.P.
(Title)

of YOUR NEIGHBORHOOD MORTGAGE INC
(Name of Corporation)

P05000047914, a corporation organized under the laws of the State of
(Document Number, if known)


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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