

P05000090852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

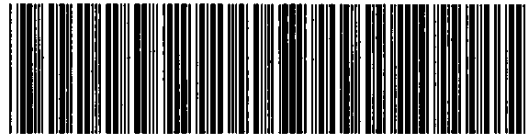
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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O/D

Resign.

08/18/06 DC

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BR MORTGAGE GROUP CORP  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000090852

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

Please return all correspondence concerning this matter to the following:

MARCOS REZENDE

(Name of Person)

CSG - CAPITAL SERVICES GROUP INC

(Name of Firm/Company)

822 SE 9th ST - PALM PLAZA

(Address)

DEERFIELD BEACH, FL 33441

(City/State and Zip Code)

For further information concerning this matter, please call:

MARCOS REZENDE

(Name of Person)

at ( 954 ) 427-4770

(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

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** BR MORTGAGE GROUP CORP

**DOCUMENT NUMBER:** P05000090852

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARCOS REZENDE

(Name of Contact Person)

CSG - CAPITAL SERVICES GROUP CORP

(Firm/ Company)

822 SE 9th ST - PALM PLAZA

(Address)

DEERFIELD BEACH, FL 33441

(City/ State and Zip Code)

For further information concerning this matter, please call:

MARCOS REZENDE

(Name of Contact Person)

at ( 954 ) 427-4770

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

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

**Street Address**

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

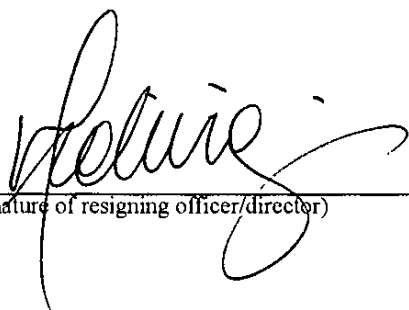
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, HEDNILSON C. OLIVEIRA, hereby resign as V.PRESIDENT /DIRECTOR/  
(Title)

of BR MORTGAGE GROUP, CORP  
(Name of Corporation)

P05000090852, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 AUG -7 PM 4:10

**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