(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<i>⇒ #</i> )
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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FILEO SECRETARY.OF-STATE TALLAHASSEE: FLORIDA



## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: MAIN Sheet Mortgage Lending Enterprises Inc.	
DOCUMENT NUMBER: PD60000136	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.	
Please teturn all correspondence concerning this matter to the following:	
Curlet: (Name of Firm/Company) Previous Appleso:  3409 NZ Giller Tero  Standing Tensen Bacch 7  (Address)  Address)	<u>ر</u>
Haysuile 28904 (City/State and Zip Code)	
For further information concerning this matter, please call:	
TARICIA Secret at (772) 285-2350 (Area Code & Daytime Telephone Number)	
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.	

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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607,0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, ATRICIA L. Beckor (Name of Registered Agent)
hereby resigns as Registered Agent for MAW Street Mortgag Jenning Enter OF (Name of Corporation)
Polyzoco 136 (Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.  (Signature of Resigning Agent)
If signing on behalf of an entity:  TatRicia L. Beclas  (Typed or Printed Name)  Taggregation  (Capacity)  Taggregation  Taggreg
Fee for filing this document:  \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/

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

withdrawn corporation