

PD6000025129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

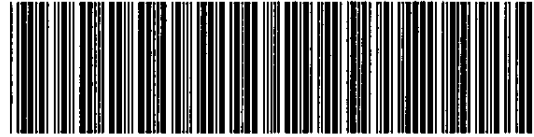
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Grate Mortgage Corporation  
(Name of Corporation)

**DOCUMENT NUMBER:** PO6000 25129

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

Please return all correspondence concerning this matter to the following:

Oscar Mendez / <sup>or</sup> Doug Mox  
(Name of Person)

Grate Mortgage Corporation  
(Name of Firm/Company)

412 SW 14th Ave  
(Address)

FL Land FL 33312  
(City/State and Zip Code)

For further information concerning this matter, please call:

Oscar Mendez / <sup>or</sup> Doug Mox at (954) 638 0666  
(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

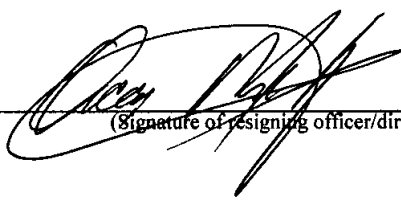
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Josue Mendez, hereby resign as President  
(Title)

of Grace Mortgage Corporation  
(Name of Corporation)

PO 6000025129, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
**07 APR 24 PM 2:03**  
**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