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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: REGIONS MORTGAGIE 3 FINANCIAL SECURES, CORP. (Name of Corporation)
DOCUMENT NUMBER: P0(20000 5(2 202
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
THABATA PEREZ. SENNINI (Name of Person)
(Name of Firm/Company)
3)52 Spellson AUE. #2 (Address)
COCONUT Carove FL 33133 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
ABDALLANH HABOUD at (305) 282-5527 (Name of Person) (Area Code & Daytime Telephone Number)
(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

2001 APR -4 PM 3: 09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, THABATA	PEREZ. SEGN	ואו	, hereby resig	gn as	VICE PRESIDENT			
						(Title)		
of Regions	Mortange (Name	of Corpor	Fimmeral	S	<u> 1</u> 601663	, lon	<u> </u>	
Poll 0000 50 (Document Nu	e 20 Z imber, if known)	, a corp	oration organize	ed und	er the laws	of the State	of	
FLORIDA		<b></b> '						
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	Ţ1	5:	3/15					
	79	Signature o	f recigning officer	/directo	74.	<del></del>		

## 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