P06000064444

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700302705507

08/18/17--01004--002 **多5**7**〇**〇

FILED

17 AUG 18 PM 1:12

SECARÉSSES ATTAIN

AUG 2 2 2017 S. PRATHER

TRANSMITTAL LETTER

Division of Corporations ACCURATE MORTGAGE GROUP, INC (Name of Corporation) DOCUMENT NUMBER: P06000064444 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CIRO ALMEIDA (Name of Person) ACCURATE MORTGAGE GROUP, INC (Name of Firm/Company) 7901 KINGSPOINTE PKWY STE 21 (Address) ORLANDO FL 32819 (City/State and Zip Code) For further information concerning this matter, please call: at (407)856-5622 (Area Code & Daytime Telephone Number) CIRO ALMEIDA (Name of Person) 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 Tallahassec, FL 32314

Amendment Section

TO:

Street Address:

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, CAROLINA LIENDO	, hereby resign as VICE PRESIDENT
-,	(Title)
of ACCURATE MORTGA	
P06000064444 (Document Number, if known)	oration organized under the laws of the State of
FLORIDA	Jacobs PH 1: 05 Tessigning officer/director)

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