

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	•
(Cit	ty/State/Zip/Phone	9 #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ · Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



400094762564

03/28/07--01026--021 **70.00

De Pro-

O7 MAR 28 AM 7: 57
SECRETARY OF STATE
TALL AHASSES STATE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MAT MORIGING (Name of Corporation)

DOCUMENT NUMBER: POT 0000 | 05 | 8

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

DUNG MAT (Name of Person)

MAT MORTGAGE (DEPORATION)

(Name of Firm/Company)

TORS JAMES STREET

(Address)

City/State and Zip Code)

For further information concerning this matter, please call:

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, DUNG HUNG MAI, hereby resign as DIRECTO	5R	
of MAI MORTONGE CONP. (Name of Corporation)		 ,
P0700010518, a corporation organized under the laws of the S	tate of	
Florida.		
(Signature of resigning officer/director)		a
ASSE		
E. FLORIC		

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

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