

PD8000071909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

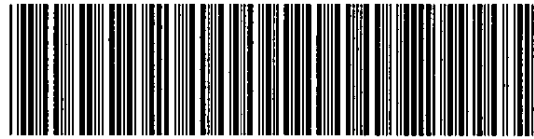
(Business Entity Name)

(Document Number)

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08 OCT 20 PM 2:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0102  
10/23/08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Florida Loan Resolution Services, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P08000071909

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

Please return all correspondence concerning this matter to the following:

Ines Torres

(Name of Person)

Florida Loan Resolution Services, Inc.

(Name of Firm/Company)

8053 Northwest 155th Street

(Address)

Miami Lakes, FL 33015

(City/State and Zip Code)

For further information concerning this matter, please call:

Ines Torres

(Name of Person)

at ( 305 ) 819-5999

(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, Emma Castillo, hereby resign as Vice-President  
(Title)

of Florida Loan Resolution Services, Inc.  
(Name of Corporation)

P08000071909, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

*Emma Castillo*  
(Signature of resigning officer/director)

**FILED**  
08 OCT 20 PM 2:29  
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