

F09000004439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

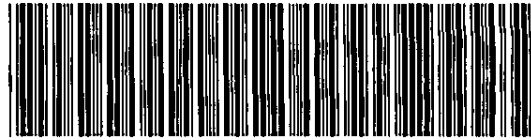
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

old Resignation

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** N.E.W. Warranty Services, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Nikki Brown  
(Name of Person)

Asurion Insurance Services  
(Name of Firm/Company)

8880 Ward Parkway  
(Address)

Kansas City, MO 64114  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nikki Brown at ( 816 ) 237-3073  
(Name of Person) (Area Code & Daytime Telephone Number)

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  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

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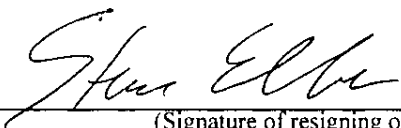
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Steve Ellis, hereby resign as Chief Exec Officer/Director/President  
(Title)

of N.E.W. Warranty Services, Inc.  
(Name of Corporation)

FO9000004439, a corporation organized under the laws of the State of  
(Document Number, if known)

Delaware

  
(Signature of resigning 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

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