

K3499D

(Requestor's Name)

(Address)

(Address)

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TALLAHASSEE, FLORIDA

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R. WHITE

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Southern Adjustment Services, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** K34990

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

Please return all correspondence concerning this matter to the following:

Connie Corolla

(Name of Person)

Southern Adjustment Services, Inc

(Name of Firm/Company)

P.O. Box 848923

(Address)

Pembroke Pines, FL 33084

(City/State and Zip Code)

For further information concerning this matter, please call:

Sam Corolla

(Name of Person)

at ( 800 ) 771-9999

(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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Connie Corolla, hereby resign as Vice President  
(Title)

of Southern Adjustment Services, Inc.  
(Name of Corporation)

K34990, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Connie Corolla  
(Signature of resigning officer/director)

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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