P10000024689

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

Office Use Only



100199187951

04/08/11--01004--004 **35.00

TI APR -8 PH 3: 48

C.COULLIETTE

APR 08 2011

EXAMINER

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Resignation of	f Officer/Director
SUBJECT.	(Name of Corporation)
DOCUMENT NUMBER:_	P10000024689
The enclosed Officer/Directo	r Resignation for a Corporation and fee are submitted for filing
Please return all corresponde	nce concerning this matter to the following:
Steven G. Dunkle	
(Name	of Person)
Connect Insurance	
(Name of F	irm/Company)
125 S. State Road 7, #10	4-178
(Ac	idress)
Wellington, FL 33411	
(City/State	and Zip Code)
For further information conce	erning this matter, please call:
Steven G. Dunkle	at (561) 433-2215 (Area Code & Daytime Telephone Number)
(Name of Pers	on) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.0	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

Steven G. Dunkle	, hereby resign as Vice President
	(Title)
of United States Regional Econ	omic Development Authority, Inc.
	ne of Corporation)
P10000024689 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	 ·

(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