

P/4 000077168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

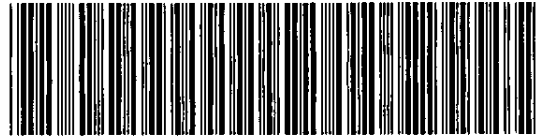
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE

FEB 26 2016

D CONNELL

O/D Resign.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: G&G PROPERTY AND CASUALTY INSURANCE COMPANY
(Name of Corporation)

DOCUMENT NUMBER: P14000077168

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

Please return all correspondence concerning this matter to the following:

Andrea Cubit

(Name of Person)

(Name of Firm/Company)

1599 SW 21 Street

(Address)

Boca Raton, FL 33486

(City/State and Zip Code)

For further information concerning this matter, please call:

Andrea Cubit

(Name of Person)

at (**954**) **937-0237**

(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, Andrea Cubit, hereby resign as MGR
(Title)

of G&G PROPERTY AND CASUALTY INSURANCE COMPANY,
(Name of Corporation)

P14000077168, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Andrea Cubit

(Signature of resigning officer/director)

16 FEB 16 PM 2:04
STATE OF 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