P94000053936

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Special Instructions to Filing Officer:					





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SECRETARY OF STATE

off. Resign.

TB 7-9-09

COVER LETTER

Statewide Premium Finance, Inc. SUBJECT: (Name of Corporation) P94000053936 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: Karen Shaw (Name of Person) Statewide Premium Finance, Inc. (Name of Firm/Company) University Drive Suite 300 (Address) Coral Springs, Florida 33065 (City/State and Zip Code) For further information concerning this matter, please call: Karen Shaw 510-8008 ext 101 (Area Code & Daytime Telephone Number) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: **Mailing Address:** Amendment Section Amendment Section Division of Corporations Division of Corporations Post Office Box 6327 Tallahassec, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ANGUL SALANDIS AMIDIS COLOR OF THE PROPERTY OF

ſ,	Dana Manning		_, hereby resig	n as	Director	10
					(Title)	
ı	Statewide	Premium	Finance,	Inc.		
	(Na	me of Corporat	ion)			······································
	P94000053936	, a corporation organized under the laws of the State of				
	(Document Number, if known)		G			
	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