

519693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

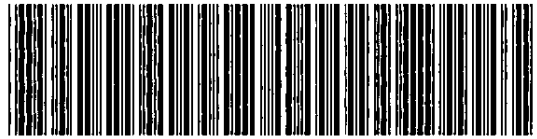
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100168436991

02/25/10--01024--001 **35.00

FILED
10 FEB 25 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. Coulliette
C.COULLIETTE

FEB 26 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Reiter Insurance Agency, Inc.
(Name of Corporation)

DOCUMENT NUMBER: 519693

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

Please return all correspondence concerning this matter to the following:

Stuart A. Reiter
(Name of Person)

Reiter Insurance Agency, Inc.
(Name of Firm/Company)

P.O. Box 518
(Address)

Crescent City, FL 32112
(City/State and Zip Code)

For further information concerning this matter, please call:

Stuart A. Reiter at (386) 698-2400
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 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**

I, Janet L. Reiter, hereby resign as Treasurer
(Title)

of Reiter Insurance Agency, Inc.,
(Name of Corporation)

519693, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Janet L. Reiter
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 FEB 25 AM 10:53

FILED

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