

596732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Resignation
of Officer

06/25/09--01018--020 **35.00

2009 JUN 25 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

AR
6/26/09

6-23-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Campbell & Roberts INS. INC.
(Name of Corporation)

DOCUMENT NUMBER: 596732

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

Please return all correspondence concerning this matter to the following:

ARTHUR CAMPBELL
(Name of Person)

Campbell & Roberts INS
(Name of Firm/Company)

3201 N FEDERAL HWY #200
(Address)

FT LAUDERDALE, FL 33306
(City/State and Zip/Code)

For further information concerning this matter, please call:

ARTHUR CAMPBELL at (954) 561-2220
(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**

FILED
2009 JUN 25 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ROBERT V. ROBERTS, JR., hereby resign as VICE PRESIDENT
(Title)

of CAMPBELL & ROBERTS INSURANCE, INC.,
(Name of Corporation)

596732, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Robert V. Roberts
(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