

L04000008112

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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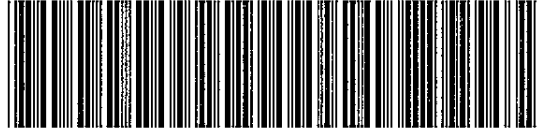
(Business Entity Name)

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CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 0721000000032

REFERENCE : 420663 7272435

AUTHORIZATION :

COST LIMIT : *Patricia Pizuto*
55.00

ORDER DATE : February 2, 2004

ORDER TIME : 3:40 PM

ORDER NO. : 420663-010

CUSTOMER NO: 7272435

CUSTOMER: Steve Pigan
Zorrilla & Robin
Suite 705
2200 South Dixie Highway
Miami, FL 33133

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ANNUAL REPORT FILING

NAME: FLORIDA MUTAL ASSURANCE
TRUST, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight-EXT#2956

EXAMINER'S INITIALS: _____

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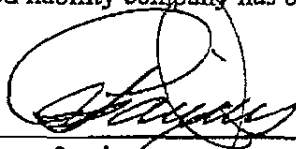
RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Vidal Sainz, Jr., hereby resign as Managing Member
(Title)

of Florida Mutual Assurance Trust, LLC
(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida

and affirm that the limited liability company has been notified in writing of the resignation.



(Signature of resigning manager, managing member or member)

Vidal Sainz, Jr.

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P.O. Box 6327
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