

M21671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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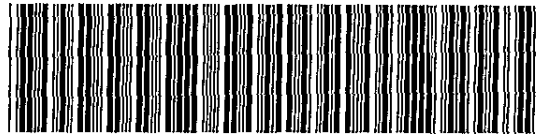
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TALLAHASSEE, FL 32399

DFF. Resign

O. Coulllette DEC 08 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

Dec. 1, 2004

SUBJECT: THE ALLEN MORRIS INSURANCE AGENCY, A FLORIDA CORPORATION

DOCUMENT NUMBER: M21671

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence in this matter to the following:

Robert M. Hunter
(Name of Person)

N/A
(Name of Firm/Company)

P.O. Box 831535
(Address)

Miami, FL 33283-1535
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert M. Hunter at (305) 978-1006
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

<u>Mailing Address:</u>	<u>Street Address:</u>
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	409 E. Gaines Street
Tallahassee, FL 32314	Tallahassee, FL 32399

**OFFICER/DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ROBERT M. HUNTER, hereby resign as SECRETARY of THE ALLEN MORRIS INSURANCE AGENCY, A FLORIDA CORPORATION, Document Number M21671, a corporation organized under the laws of the State of Florida.

R. M. Hunter

(Signature of resigning officer/director)

Dated this 1st day of December 2004

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

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