

P00000029681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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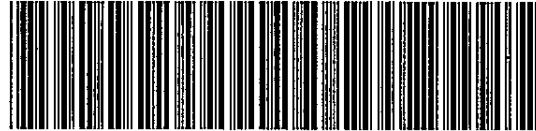
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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officer Rosignol

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A-ONE DISCOUNT INSURANCE, INC.
(Name of Corporation)

DOCUMENT NUMBER: P000000 29681

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

Please return all correspondence concerning this matter to the following:

FRANCISCO J. IBARRA
(Name of Person)

A-ONE DISCOUNT INSURANCE
(Name of Firm/Company)

13710 SW 56 STREET - SUITE-K
(Address)

MIAMI, FL 33175
(City/State and Zip Code)

For further information concerning this matter, please call:

ANA LUGO GONZALEZ at (305) 383 2203
(Name of Person) (Area Code & Daytime Telephone Number)

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

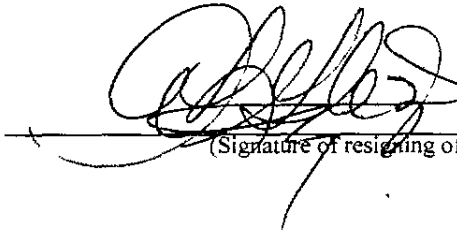
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Gina Lugo Gonzalez, hereby resign as Secretary and Director
(Title)

of G-One Reinsurance, Inc.
(Name of Corporation)

P000000 29681, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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