

P00000049080

(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



500119473355

03/07/08--01001--017 **35.00

FILED
08 MAR -5 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off Roan

G. Goulette MAR 06 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: D & D Insurance Consultants, Inc., a Florida Corporation
(Name of Corporation)

DOCUMENT NUMBER: P00000049080

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

Please return all correspondence concerning this matter to the following:

Maybel Castellon

(Name of Person)

D & D INSURANCE CONSULTANTS, INC.

(Name of Firm/Company)

870 East 6th Avenue

(Address)

Hialeah, FL 33010

(City/State and Zip Code)

For further information concerning this matter, please call:

Maybel Castellon

(Name of Person)

at (305) 343-5235

(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, Sonia Elizabeth Aragon, hereby resign as President/Secretary/Director
(Title)

of D & D Insurance Consultants, Inc.
(Name of Corporation)

P00000049080, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILING FEE IS \$35.00

FILED
08 MAR -5 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314