P01000013474

(Requestor's Name)
·
(Address)
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(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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SECRETARY OF STATE IVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: DIVERSIFIED INVESTMENT ADMINISTRATION, INC.
(Name of Corporation)
DOCUMENT NUMBER: P01000013474
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
ROBERTO A. RIAL (Name of Person)
DIVERSIFIED INVESTMENT ADMIN. INC. (Name of Firm/Company)
719 CRANDON BLVD. #410 (Address)
KEY BISCAYNE, FL 33149 (City/State and Zip Code)
For further information concerning this matter, please call:
ROBERTO A. RIAL at (305) 776-5824 (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



September 8, 2008

ROBERTO A. RIAL 719 CRANDON BLVD #410 KEY BISCAYNE, FL 33149

SUBJECT: DIVERSIFIED INVESTMENT ADMINISTRATION, INC.

Ref. Number: P01000013474

We have received your document for DIVERSIFIED INVESTMENT ADMINISTRATION, INC.. However, the document has not been filed and is being returned for the following:

The fee to resign as officer/director for a corporation is \$35 per person resigning.

The total amount due is \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 408A00049141

SECRETARY:0F-STATE
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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

BARBARA R. A. DIVERSIFIED INVESTI	(Title) MENT ADMINISTRATION, INC.
201000013474 (Document Number, if known	(Name of Corporation), a corporation organized under the laws of the State of
FLORIDA	·
_	Darbara Dial &
	(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