

PO1000020736

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

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(Business Entity Name)

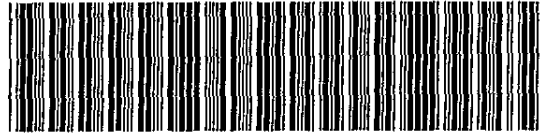
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TALLAHASSEE, FLORIDA

5/14/05
D.D.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Assurance Title & Escrow of South Florida, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P01000020736

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

Please return all correspondence concerning this matter to the following:

Gary I. Handin,
(Name of Person)

Gary I. Handin, P.A.
(Name of Firm/Company)

3111 University Dr.
(Address)

Coral Springs, FL 33065
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary I. Handin at (954) 796-9600
(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, Joseph V. Mondelli, hereby resign as Vice President & Director
(Title)

of Assurance Title and Escrow of South Florida, Inc.,
(Name of Corporation)

P01000020736, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
04 DEC 28 AM 8:55
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