## P01000081840 Requester's Name

Ci 8720 S.W. 9th Terrace Miami, Fl 33174

500004718355--8 -12/11/01--01041--001 \*\*\*\*\*35.00 \*\*\*\*\*\*35.00

Office Use Only

Examiner's Initials (

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1(Corporation Name)  2(Corporation Name)  3	(Document #)	
(Corporation Name) 4(Corporation Name)	(Document #)	<u></u>
Walk in Pick up time  Mail out Will wait	(Document #)  Certified Copy  Photocopy  Certificate of S	tatus
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  PECISTRATION/OHAL RESCATION	SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other	

CR2E031(7/97)

## OFFICER / DIRECTOR RESIGNATION

I,	, hereby resign as Vice President (Title)
of LPI Benefits (Name of Corporation	, Inc.
a corporation organized under the laws of the Stat	te of Florida
and affirm that the corporation has been notified i	in writing of the resignation.
Mascus (Signature of re	Estevo) resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314