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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SPIRIT TITLE & ESCROW, INC.
(Name of Corporation)

DOCUMENT NUMBER: P020000319P4

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

Please return all correspondence concerning this matter to the following:

BRAD P. SCOBEE
(Name of Person)

SPIRIT TITLE & ESCROW, INC.
(Name of Firm/Company)

9000 SHERIDAN STREET #103
(Address)

PENBROKE PINES FL 33024
(City/State and Zip Code)

For further information concerning this matter, please call:

BRAD P. SCOBEE at (954) 862-2241
(Name of Person) (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, SHELLEY HEAPS BONATE, hereby resign as DIRECTOR, V.P. & SEC.
(Title)

of SPIRIT TITLE & ESCROW, INC.
(Name of Corporation)

PO2000031984, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Shelley Heaps Bonate
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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