

PD2000047328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

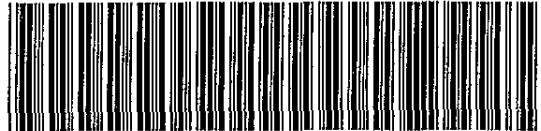
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400027298184

01/21/04--01025--008 **35.00

04 JAN 20 PM 4:29

SECOND DISTRICT STATE
TALLAHASSEE, FLORIDA

off/die resig
MAR 1/28

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GOLD INSURANCE AGENCY INC.
(Name of Corporation)

DOCUMENT NUMBER: P02000047328

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

Please return all correspondence concerning this matter to the following:

MICHAEL S. DOAR, ESQ.
(Name of Person)

(Name of Firm/Company)

TURNBERY PLAZA, SUITE 500, 2875 NE 191ST ST
(Address)

AVENTURA, FL 33180
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL S. DOAR at (305) 792-5300
(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, JENNY A. ZAMORA, hereby resign as VICE PRESIDENT / DIRECTOR
(Title)

of GOLD INSURANCE AGENCY INC.
(Name of Corporation)

P02000047328, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
04 JAN 20 PM 4:29
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