

PO2000131482

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

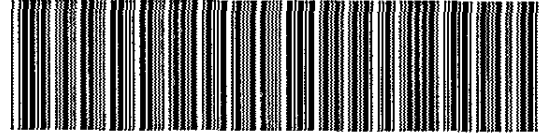
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CROWN TITLE AND SERVICES, CORPORATION

DOCUMENT NUMBER: P02000131482

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alix j Montes, Esq.

(Name of Contact Person)

(Firm/ Company)

11111 Biscayne Blve , Apt 253

(Address)

North Miami, FLorida 33181

(City/ State and Zip Code)

For further information concerning this matter, please call:

Alix J. MONTES

(Name of Contact Person)

at (305) 756-3100

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$35 Filing Fee

\$43.75 Filing Fee &
Certificate of Status

\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

\$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

AFFIDAVIT OF RESIGNATION OF OFFICER

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

I, Alix J Montes, after being duly sworn, states that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:

- 1. I, Alix J Montes hereby resign as President of Crown Titles and Services, a Florida corporation;
2. That the corporation has been notified in writing of the resignation; and
3. That the corporate minutes relating to the resignation are unavailable.

Alix J Montes
Alix J Montes

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TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
) ss:
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 25th day of September, 2006 by Alix J Montes, who is personally known to me [checked], or who has produced a FL DL as identification and who did (did not) take an oath.

Print Name: ANGELA GACHELIN
Title: Notary Public
Commission No.: (if any)

My Commission Expires: 06/26/2010

