

P03000002411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

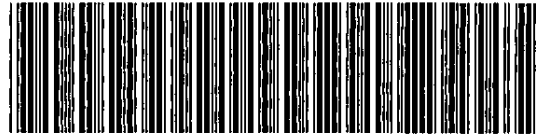
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600110990786

10/23/07--01008--023 **35.00

FILED
07 OCT 23 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

012501
10.23.07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUPERIOR LIEN SERVICES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P03000002411

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

Please return all correspondence concerning this matter to the following:

HECTOR NAVARRO

(Name of Person)

(Name of Firm/Company)

15392 SW 14 LN

(Address)

MIAMI/FL/33194

(City/State and Zip Code)

For further information concerning this matter, please call:

HECTOR NAVARRO at (305) 5539962
(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, VALENTIN NAVARRO, hereby resign as VICE PRESIDENT
(Title)

of SUPERIOR LIEN SERVICES, INC.
(Name of Corporation)

P03000002411, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
07 OCT 23 AM 11:00
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