

PO400020790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

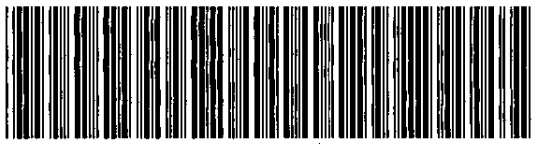
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2008 MAR 18 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signatures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Central Florida true title, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P04000020790

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

Please return all correspondence concerning this matter to the following:

Onesimo Arburo
(Name of Person)

Central Florida true title, Inc
(Name of Firm/Company)

12554 S. John Young Parkway, Ste 105
(Address)

Orlando, Florida 32837
(City/State and Zip Code)

For further information concerning this matter, please call:

Silvio Arburo at (407) 583-4898
(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, Onesimo Arburo, hereby resign as Vice President
(Title)

of Central Florida Title, Inc
(Name of Corporation)

P04000020790, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.


(Signature of resigning officer/director)

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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