

P04000150369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

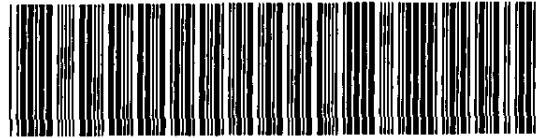
(Business Entity Name)

(Document Number)

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300095122673

Resignation

*of
officer*

04/03/07--01003--011 **35.00

FILED
2007 APR -3 PM 3:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*FOR
4/4/07*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SunFi Insurance Serv Inc.
(Name of Corporation)

DOCUMENT NUMBER: PD4000150369

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

Please return all correspondence concerning this matter to the following:

Gezim Malolli
(Name of Person)

SunFi Insurance Serv. Inc.
(Name of Firm/Company)

5051 Castello Dr #25
(Address)

Naples, FL 34103
(City/State and Zip Code)

For further information concerning this matter, please call:

Gezim Malolli at (239) 595-5915
(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**

FILED

2007 APR -3 PM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Belinda Malolli, hereby resign as President
(Title)

of SunFi Insurance Services Inc.
(Name of Corporation)

P04000150369, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Belinda Malolli
(Signature of resigning officer/director)

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