

P06000031636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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O/D Resign.
10/03/06

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Malolli Insurance Group, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P 06000031636

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

Please return all correspondence concerning this matter to the following:

Belinda Malolli
(Name of Person)

Malolli Ins. Group
(Name of Firm/Company)

4760 Tamiami Trail n #26
(Address)

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

For further information concerning this matter, please call:

Belinda Malolli at (239) 263 2331
(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, Fatmir Kazmaj, hereby resign as OFFICER
(Title)

of Malouli Insurance Group, Inc.
(Name of Corporation)

PD160000 31636, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Fatmir Kazmaj
(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

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DIVISION OF CORPORATIONS
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