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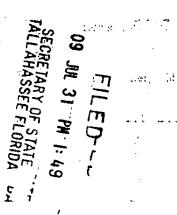
| (Requestor's Name) | | | | | | | | |
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| PICK-UP WAIT MAIL | | | | | | | | |
| | | | | | | | | |
| (During on Faith March) | | | | | | | | |
| (Business Entity Name) | | | | | | | | |
| | | | | | | | | |
| (Document Number) | | | | | | | | |
| · | | | | | | | | |
| Certified Copies | | | | | | | | |
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| Special Instructions to Filing Officer: | | | | | | | | |
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Office Use Only



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COVER LETTER

| TO: | Amendment Section Division of Corporations |
|--|---|
| SUBJ | Downtown Title Services, Inc. |
| | (Name of Corporation) |
| DOC | UMENT NUMBER: P06000056906 |
| The e | nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please | e return all correspondence concerning this matter to the following: |
| | David Rabias |
| | (Name of Person) |
| | Downtown Title Services, Inc. |
| | (Name of Firm/Company) |
| | 254 W Voorhis Avenue |
| | (Address) |
| , | DeLand, FL 32720 |
| | (City/State and Zip Code) |
| For fu | rther information concerning this matter, please call: |
| Lin | da S. Forare at (386) 738-9197 (Name of Person) (Area Code & Daytime Telephone Number) |
| | (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclos | sed is a check for \$35.00 made payable to the Florida Department of State. |
| Ameno Division Clifton 2661 E | Address: dment Section on of Corporations on Building Executive Center Circle assee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 |

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, | David | Rabias | | | hereby resign as | Vice | President (Title) | <u>. & </u> | Treasurer |
|-----------|--------|--------|---------------------|---------------|------------------------------------|------------|----------------------|-------------------------|-----------|
| of _P0 | 600005 | | Title Se (Name o | | , Inc. n) ntion organized ur | der the la | aws of the State | e of | , |
| Fl | orida | | | - • | | | | | |
| | | - 2 |) ung | gnature of re | signing officer/direct | ior) | TALLAHASSEE FLORIDA | 04 :1 14 15 11 An 1: 48 | FILED |
| | | | F | LING FE | E IS \$35.00 | | <i>!</i> | <i>:</i> | |

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

Make checks payable to Florida Department of State and ma o: