

P06000093159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 NOV 30 AM 8:09

Resign

G. Ouellette NOV 30 2007

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESIGNATION OF AN OFFICER / DIRECTOR
(Name of Corporation)

DOCUMENT NUMBER: P06000093159

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

Please return all correspondence concerning this matter to the following:

MYRIAM CAMBRONNE

(Name of Person)

(Name of Firm/Company)

7392 NW 35th TERR Ste 303

(Address)

MIAMI, FL 33122

(City/State and Zip Code)

For further information concerning this matter, please call:

MYRIAM CAMBRONNE

(Name of Person)

at (305) 597- 6332

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, IVAN RIZO, hereby resign as President,
(Title)

of INSUREPRO, INC,
(Name of Corporation)

P06000093159, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(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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