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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fast Coast Health Insurance, Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Jeremy Ehrenthal
(Name of Person)

Fast Coast Health Insurance Inc
(Name of Firm/Company)

3275 W Hillsboro Blvd #309
(Address)

Deerfield Beach, FL 33442
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeremy Ehrenthal at (954) 571 4177
(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

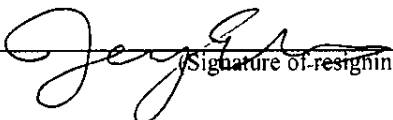
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Jeremy Aronthal, hereby resign as VP5D
(Title)

of East Coast Health Insurance
(Name of Corporation)

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

Florida


(Signature of resigning officer/director)

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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