

P07000065688

(Requestor's Name)

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(Address)

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TALLAHASSEE, FLORIDA

T. Roberts AUG 16 2007

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** United States Catastrophe Adjusters, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000065688

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

Please return all correspondence concerning this matter to the following:

John O'Keefe

(Name of Person)

United States Catastrophe Adjusters, Inc

(Name of Firm/Company)

1841 SW Diamond St

(Address)

port Saint Lucie Florida 34953

(City/State and Zip Code)

For further information concerning this matter, please call:

John O'Keefe

(Name of Person)

at ( 954 ) 829-5019

(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  
07 AUG 10 AM 11:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Lisa A O'Keefe, hereby resign as VP  
(Title)

of United States Catastrophe Adjusters, Inc.  
(Name of Corporation)

P07000065688, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Lisa C. O'Keefe  
(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