PD1000095102

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TRANSMITTAL LETTER

SUBJECT: Three Sisters Insurance Inc (Name of Corporation) DOCUMENT NUMBER: P07000095102 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Danielle Jarrett** (Name of Person) Three Sisters Insurance Inc (Name of Firm/Company) 12470 Spring Hill Dr (Address) Spring Hill, FL 34609 (City/State and Zip Code) For further information concerning this matter, please call: Danielle Jarrett (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address:** Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations 2661 Executive Center Circle P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, Jenifer Fitzpatrick	Vice President & Secretary, hereby resign as
	(Title)
Three Sisters Insu	rance Inc
	e of Corporation)
P07000095102	a corporation organized under the laws of the State of
(Document Number, if known)	<u>.</u>
Florida	

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