

P07000 113638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

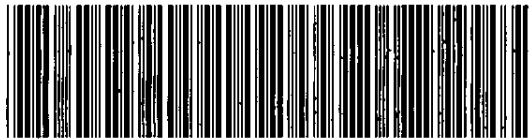
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signatures]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Weston Insurance Services Inc.
(Name of Corporation)

DOCUMENT NUMBER: P07000113638

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

Please return all correspondence concerning this matter to the following:

Husam Mohammed
(Name of Person)

Weston Insurance Services Inc.
(Name of Firm/Company)

5450 S. State Rd 7 Suite 35
(Address)

Davie FL 33314
(City/State and Zip Code)

For further information concerning this matter, please call:

Husam Mohammed at (954) 394-7740
(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, Ronald L. Thomas, hereby resign as Chief Operating Officer
(Title)

of Weston Insurance Services Inc.
(Name of Corporation)

P07000113638, a corporation organized under the laws of the State of
(Document Number, if known)

FL

Ronald L Thomas 10-16-2009
(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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TALLAHASSEE, FLORIDA