

PD8000008444

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T. CARTER

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **R & K INSURANCE SERVICES, INC.**

(Name of Corporation)

DOCUMENT NUMBER: **P08000008444**

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

Please return all correspondence concerning this matter to the following:

KAREN JOA

(Name of Person)

R & K INSURANCE SERVICES , INC.

(Name of Firm/Company)

4101 SW 112th CT

(Address)

MIAMI, FL 33165

(City/State and Zip Code)

For further information concerning this matter, please call:

KAREN JOA

(Name of Person)

at **(786) 229-2710**

(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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

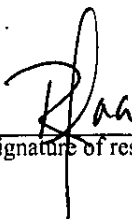
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I, ROMAN JOA, hereby resign as REGISTERED AGENT/ OWNER
(Title)

of R & K INSURANCE SERVICES, INC.
(Name of Corporation)

P08000008444, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

 11/10/14
(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