

# P08000012819

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

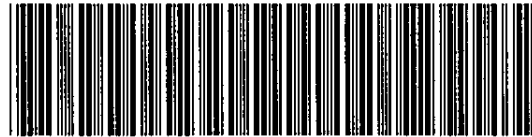
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2012 NOV 13 PM 12:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Off Resign*

NOV 13 2012

T. LEWIS

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** INSUREPRO TECHNOLOGIES INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P08000012819

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

Please return all correspondence concerning this matter to the following:

**Alexander Anthony**

(Name of Person)

(Name of Firm/Company)

**P.O. Box 52-3498**

(Address)

**Miami, FL 33152**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Alexander Anthony**

(Name of Person)

at ( **305** ) **407-7510**

(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  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**


**FILED**  
**2012 NOV 13 PM 12:35**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

I, Alexander Anthony, hereby resign as D  
(Title)

of INSUREPRO TECHNOLOGIES INC.  
(Name of Corporation)

P08000012819, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(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