(Re	equestor's Name)	
(Ad	dress)	
DA)	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Fireproof Safety Equipment Company (Name of Corporation)
DOCUMENT NUMBER: PO8000033279
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mary M. Suarez-Segura (Name of Person) (Name of Firm/Company) 11701 S.W. 91 Terrace: (Address) Miami, FL. 33186 (City/State and Zip Code)
For further information concerning this matter, please call:
Mary Suarez-Segura at (786) 285-4308 (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
Post Office Box 6327

Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

	M. Geaura")
M. I. MarySugrez-Segura	(f/k/0" Mary Segur 0") (f/k/0" Mary Segur 0") , hereby resign as Vice - Pusicles (Title)
of Fileproof Safet	Y Equipment Company of Corporation)
(Name o	of Corporation)
(Document Number, if known)	_, a corporation organized under the laws of the State of
Florida	· _•

(Signature of Sesigning officer/director)

SECRETARY OF STATE

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