## P0800004585/

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## **COVER LETTER**

TO: ··· Amendment Section
Division of Corporations

SUBJECT: Floridas First Choice Insurance, Inc.
(Name of Corporation)

DOCUMENT NUMBER: PO80004581

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

Please return all correspondence concerning this matter to the following:

Jtssico Zovorior
(Name of Person)

Flonda's First Choice Insurance, Inc.

1765 & Roseword Ct

Vero Beach, FL 32966

For further information concerning this matter, please call:

(Name of Person) at (954) 873 8800 (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, <u>Mary Hairanian</u> , hereby resign as VP	ritle)		<del></del>
of Florida's First Chaice Insura	wec	, <u> </u>	toc.
Poscov4581 , a corporation organized under the laws of the (Document Number, if known)			
FL.			
Mary Halsanian (Signature of resigning officer/director)	SECRETARY OF STAT	08 MAY 30 AM 10: 52	

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