## P08000049500

(Requestor's Name)		
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(Address)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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Certified Copies	Cortificato	e of Statue
Certified Copies	. Certificates	s of Status
Special Instructions to Filing Officer:		
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officer Resignation
18 10/7/08

## **COVER LETTER**

Amendment Section

TO:

Division of Corporations Secured Investment Solutions Inc. (Name of Corporation) P08000049500 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Matt Harmon (Name of Person) Secured Investment Solutions, Inc. (Name of Firm/Company) 657 Arbuckle Court (Address) Winter Springs, FL 32708 (City/State and Zip Code) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: **Mailing Address:** Amendment Section
Division of Corporations Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

SEP 29

AND TALLE CREET AND

Steven Reilla	, hereby resign as Vice President (Title)	
^)	(Title)	
of Secured Investment Solution	is Inc.	
(Nan	ne of Corporation)	
P08000049500	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		
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## **FILING FEE IS \$35.00**

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314