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SWISION OF CORPORATION



COVER LETTER

SUBJECT: Focus Insurance Group Inc. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: PO900032339
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
David Sequi (Name of Person)
(Name of Firm/Company)
(Name of Firm/Company)
1503 South US Huy 301 Suite 3
(/tudiesa)
Tanga, Fl 33619 (City/State and Zip Code)
For further information concerning this matter, please call:
David Segui at (813)712-4191 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. John Stevens	, hereby resign as_	γρ	le)
of Focus Insurance Gro	up TNC of Corporation)		,
Pogooo 32339 (Document Number, if known)	, a corporation organized un	der the laws of the	State of
Florida Johns	Aven-Signature of resigning officer/direct	or)	DIVISION OF CORPOR

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