

P090000092349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRIGHT LIGHT INSURANCE GROUP, INC.
(Name of Corporation)

DOCUMENT NUMBER: P09000092349

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

Please return all correspondence concerning this matter to the following:

LUIS E. TORRES

(Name of Person)

PRO ACCOUNTING AND FINANCIAL SOLL

(Name of Firm/Company)

1925 NE 45TH STREET SUITE # 128

(Address)

FORT LAUDERDALE, FL 333308

(City/State and Zip Code)

For further information concerning this matter, please call:

LUIS E. TORRES

(Name of Person)

at (954) 667-0673

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2012

LUIS E. TORRES
PRO ACCOUNTING AND FINANCIAL SOLLUTION
1925 NE 45TH STREET - SUITE 128
FORT LAUDERDALE, FL 33308

SUBJECT: BRIGHT LIGHT INSURANCE GROUP INC
Ref. Number: P09000092349

We have received your document for BRIGHT LIGHT INSURANCE GROUP INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

PHOTO COPIES OF SIGNATURES ARE NOT ACCEPTABLE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 512A00000490

RECEIVED

12 JAN 18 AM 10:00

TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MARY N. URREGO, hereby resign as DIRECTOR
(Title)

of BRIGHT LIGHT INSURANCE GROUP, INC.
(Name of Corporation)

P09000092349, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 18 PM 3:21

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