P10000004365

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DWBONF BULCING HELLIS

(Name of Corporation)

DOCUMENT NUMBER: 1000000 4 365

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

Thompson The Summe Hellism

(Name of Firm/Company)

(Address)

When Mand Dip Code)

For further information concerning this matter, please call:

(Name of Person)

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

December 29, 2010

RONALD PATTERSON THOMPSON INSURANCE AGENCY, INC. 8179 N. UNIVERSITY DRIVE, APT. 96 TAMARAC, FL 33321

SUBJECT: THOMPSON INSURANCE AGENCY, INC.

Ref. Number: P1000004365

We have received your document for THOMPSON INSURANCE AGENCY, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 110A00030121

SECRETARY OF SIATE

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

2011 JAN 10 P 4: 01

SECRETARY OF

	, Ronald Paffer	(50N), hereby resign as VIV.	TALLAHASSEE. FLORIDA
	ofs	f Corporation)	and Aslay, Inc.
<i>!</i>	(Document Number, if known)	, a corporation organized under the laws o	if the State of

(Signature of resigning officer/director)

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