P10000032406

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DECRETARY OF STATE

ALLAHASSEE, FLORIO

02/1/13

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations				
SUBJECT: DREXEL INSURANCE, INC. (Name of Corporation)					
DOC	DOCUMENT NUMBER: P10000032606				
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing				
Please	e return all correspondence concerning this matter to the following:				
Ale	ex Anthony				
	(Name of Person)				
	(Name of Firm/Company)				
P.0	D Box 52-3498				
	(Address)				
Mia	ami, FL 33152				
	(City/State and Zip Code)				
For fu	orther information concerning this matter, please call:				
Ale	(Name of Person) at (305) 407-7510 (Area Code & Daytime Telephone Number)				
	(Name of Person) (Area Code & Daytime Telephone Number)				
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.				
Amen Divisi P.O. I	ng Address: Idment Section Ion of Corporations Sox 6327 Inassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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A Company

, ALEX ANTHONY	SECRETARY OF STATE JALLAHASSEE. FLORIDA (Title)
of DREXEL INSURA	
P1000032606 (Document Number, if known)	me of Corporation), a corporation organized under the laws of the State of
FLORIDA	

(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