

P10000063701

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C LEWIS

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LIBERTY CLAIMS CONSULTANTS  
(Name of Corporation)

**DOCUMENT NUMBER:** P10000063701

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

Please return all correspondence concerning this matter to the following:

**GEORGE A QUINTERO**

(Name of Person)

**LIBERTY CLAIMS CONSULTANTS INC**

(Name of Firm/Company)

**1000 NW NORTH RIVER DR 117**

(Address)

**MIAMI, FL 33136**

(City/State and Zip Code)

For further information concerning this matter, please call:

**GEORGE A QUINTERO** at **305** **522-1188**

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

RECEIVED  
DIVISION OF CORPORATIONS

15 JUN 15 PM 1:56

I, GEORGE A QUINTERO, hereby resign as DIRECTOR  
(Title)

of LIBERTY CLAIMS CONSULTANS INC,  
(Name of Corporation)

P10000063701

(Document Number, if known)

, 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