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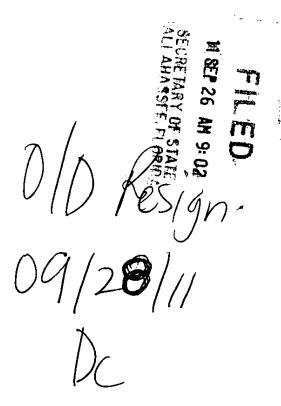
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TO:	Amendment Section Division of Corporations
SUBJ	The Vines Title Services Inc. (Name of Corporation)
DOC	UMENT NUMBER:
	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
	e return all correspondence concerning this matter to the following:
Stac	sy Bogert
	(Name of Person)
The	Vines Title Services Inc
	(Name of Firm/Company)
21	1ando, FL 32804
<u>Or1</u>	lando FL 32804 (City/State and Zip Code)
For fu	orther information concerning this matter, please call:
Stacy	y Bogert at (407) 496-4288 (Name of Person) (Area Code & Daytime Telephone Number)
Enclos	sed is a check for \$35.00 made payable to the Florida Department of State.
Amen Divisi Cliftor 2661 I	Mailing Address: dment Section on of Corporations n Building Executive Center Circle passee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ī.	Stacy Bogert	_, hereby resign as_	Vice President				
^" _				(Title)			
of_	The Vines Title Services, Inc.					······································	
	(Name of Corporat	ion)					
	(Document Number, if known)	oration organized un	der the laws o	f the State	e of		
	Florida						
		Y. Boge resigning officer/direct		SEURETARY OF STATE	M SEP 26 AM 9: 02	T	

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