

P11000028809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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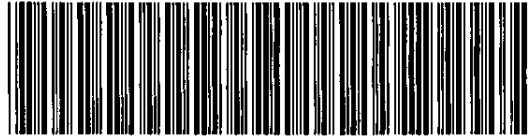
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FIRST OPTION INSURANCE, Inc
(Name of Corporation)

DOCUMENT NUMBER: P11000028809

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

Please return all correspondence concerning this matter to the following:

ZENAIDA R. TELLO
(Name of Person)

FIRST OPTION INSURANCE, Inc
(Name of Firm/Company)

2211 COUNTRY CLUB PRADO
(Address)

Coral Gables FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

ZENAIDA TELLO at (786) 444-5415
(Name of Person) (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

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

FILED

OCT 24 AM 8:42


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ZENARDA TELLO, hereby resign as President
(Title)

of FIRST OPTION INSURANCE, Inc.
(Name of Corporation)

P11000028809, a corporation organized under the laws of the State of
(Document Number, if known)

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