

P130000069444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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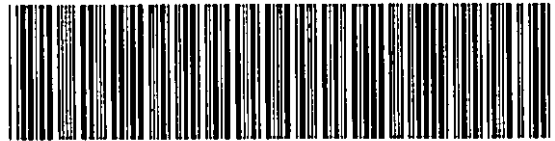
(Business Entity Name)

(Document Number)

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2018 APR 16 PM 2:29

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TRANSMITTAL LETTER

2013 APR 16 PM 2:28

TO: Amendment Section
Division of Corporations

SUBJECT: Gibson Insurance Services Inc.
(Name of Corporation)

DOCUMENT NUMBER: P13000069444

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

Please return all correspondence concerning this matter to the following:

Tony Masiotti
(Name of Person)

~~NAME~~ Gibson Insurance Services
(Name of Firm/Company)

107 SUFFOLK DR.
(Address)

ROYAL PALM BEACH FL. 33411
(City/State and Zip Code)

For further information concerning this matter, please call:

Tony Masiotti at (561) 3071612
(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**

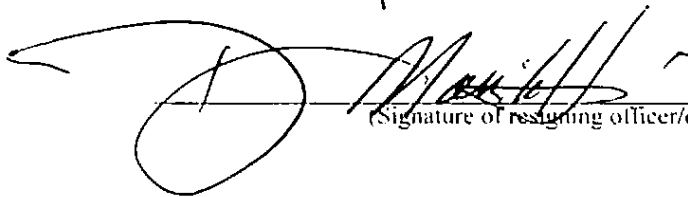
2018 APR 16 PM 2:20

I, Tony Masilotti, hereby resign as DIRECTOR
(Title)

of Gibson Insurance Services Inc
(Name of Corporation)

P13000069444, 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