

P14000044858

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

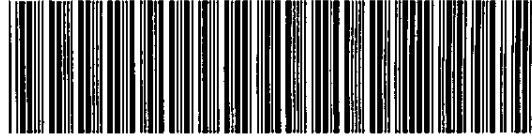
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*Resignation  
to Officer*

01/20/15--00025 -009 \*#35.01

FILED  
2015 JAN 20 PM 2:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*DR*  
*1/21/15*

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Nextsure Insurance and Financial Services, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P14000044858

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

Please return all correspondence concerning this matter to the following:

Adolfo Arteaga  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

P.O. Box 1552  
(Address)

Eagle Lake, FL 33839  
(City/State and Zip Code)

For further information concerning this matter, please call:

Adolfo Arteaga at ( 863 ) 660-1774  
(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**

FILED

2015 JAN 20 PM 2:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Adolfo Arteaga, hereby resign as V.P. (Title)

of Nextsure Insurance and Financial Services, Inc.  
(Name of Corporation)

P14000044858, 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