

P93000074437

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(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Central Insurance Network Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P93000074437

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

Please return all correspondence concerning this matter to the following:

Jose V. de Oña  
(Name of Person)

Central Insurance Network Inc.  
(Name of Firm/Company)

395 Alhambra Circle, Suite 200,  
(Address)

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

For further information concerning this matter, please call:

Jose V. de Oña at ( 305 ) 803-3416  
(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

# **Central Insurance Network**

6/13/08

DIVISION OF CORPORATIONS  
AMENDMENT SECTION  
CLIFTON BUILDING  
2661 EXECUTIVE CENTER CIRCLE  
TALLAHASSEE FL 32301

RE: CENTRAL INSURANCE REF P 93000074437

RECEIVED  
JUN 13 2008  
TALLAHASSEE, FL 32301  
DIVISION OF CORPORATIONS

SEE ENCLOSED

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

2008 JUN 17 AM 8:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Juan Carlos Carrillo, hereby resign as Director  
(Title)

of Capital Insurance Network, Inc.  
(Name of Corporation)

P93000074437, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Juan Carrillo  
(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