P95000023416

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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	iy/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nar	ne)
(Do	cument Number)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

DIRES (10,2/29/08

COVER LETTER

SUBJECT: Equitable Title Agency, Inc. (Name of Corporation) DOCUMENT NUMBER: P95000023616
DOCUMENT NUMBER: <u>P9500023616</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
F. Larry Joseph (Name of Person)
Equitable Title Agency (Name of Firm/Company)
6985 Wallace RJ.
Orlando, Fl. 32819 (City/State and Zip Code)
For further information concerning this matter, please call:
Larry Joseph at (401) 370-666 4 (Name of Person) at (401) 370-666 4 (Area Code & Daytime Telephone Number)

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Suzann B. Dennis, hereby resign as V. Presiden (Title)	<u> </u>
of Equitable Title Agency, Inc. (Name of Corporation)	_,
P95000 23616, a corporation organized under the laws of the State of (Document Number, if known)	
Florida.	
(Signature of resigning officer/director)	
(Signification)	DIVÎ
Ö	Sign

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