

P95000027863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600104739936

06/25/07--01025--014 **35.00

Off / Eli Ruzo

CLERK OF STATE
TALLAHASSEE, FLORIDA

07 JUN 25 PM 12:10

FILED

T. Roberts JUN 28 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Shopsmart Insurance, Inc
(Name of Corporation)

DOCUMENT NUMBER: P 95 0000 2786.3

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

Please return all correspondence concerning this matter to the following:

Jonathan D Reich
(Name of Person)

Shopsmart Insurance, Inc
(Name of Firm/Company)

1609 E Vine Street, Ste B
(Address)

Kissimmee, FL 34744
(City/State and Zip Code)

For further information concerning this matter, please call:

Jonathan D Reich at (407) 933-7866
(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**

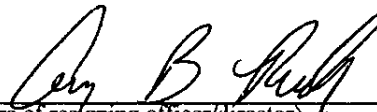
FILED
07 JUN 25 PM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Amy B Reich, hereby resign as V.P.
(Title)

of Shopsmart Insurance, Inc.
(Name of Corporation)

P95000027863, 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