

P97000021145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

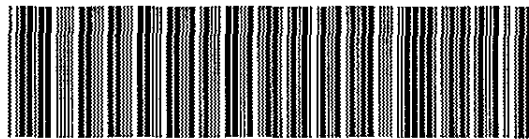
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ALABAMA STATE FILING

P97000021145
20-20-20
11/22/02

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNSET INSURANCE AGENCY, INC.
(Name of Corporation)

DOCUMENT NUMBER: P970000021145

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

Please return all correspondence concerning this matter to the following:

JORGE OCEJO
(Name of Person)

(Name of Firm/Company)

11733 SW 116 TERR
(Address)

MIAMI, FL 33186
(City/State and Zip Code)

For further information concerning this matter, please call:

JORGE OCEJO at (305) 215-2156
(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
409 E. Gaines Street
Tallahassee, FL 32399

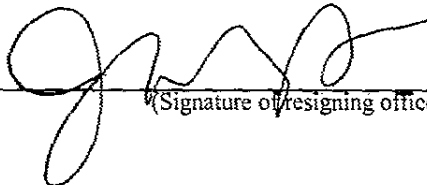
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JORGE OCEJO, hereby resign as PRESIDENT
(Title)

of SUNSET INSURANCE AGENCY, INC.
(Name of Corporation)

P970000021145, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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