

P91000099947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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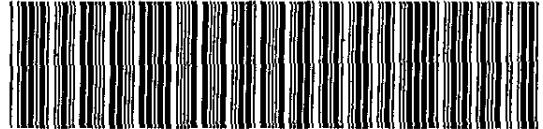
(Business Entity Name)

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@ 5/25/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EASY PAY INSURANCE, INC.
(Name of Corporation)

DOCUMENT NUMBER: P970000 99947

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

Please return all correspondence concerning this matter to the following:

LARRY KIEM
(Name of Person)

(Name of Firm/Company)

14843 HAWKMOON RUN CIRCLE
(Address)

ORLANDO, FL. 32828
(City/State and Zip Code)

For further information concerning this matter, please call:

LARRY KIEM at (407) 282-8534
(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

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TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LARRY KIOM, hereby resign as DIRECTOR, V/P
(Title)

of EASY PAY INSURANCE, INC.
(Name of Corporation)

P77000099947 a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Larry S. Kio
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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