## P05000129113

questor's Name)		
dress)		
dress)		
(City/State/Zip/Phone #)		
☐ WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
_ Certificates	of Status	
Special Instructions to Filing Officer:		
	dress)  dress)  y/State/Zip/Phone  WAIT  siness Entity Nan  cument Number)  Certificates	

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: MARTNICKS HARMACY & DISCOUNT SUCS. INC (Name of Corporation)  DOCUMENT NUMBER: POSODO129113
DOCUMENT NUMBER: POSOBOJAGII3
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROBERTS ON YENWE (Name of Person)
MARTNICKS PHARMACY & DISCOUNT SUCS. TAK.  (Name of Firm/Company)
6783 STIRLING ROAD
SAVIE, FL 33314
(City/State and Zip Code)
For further information concerning this matter, please call:
ROBERTS ONYENWE at (954) 5304698  (Name of Person) (Area Code & Daytime Telephone Number)
(Name of reison) (Area Code & Daytine 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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 12, 2012

ROBERT ONYENWE MARTINCKS PHARMACY & DISCOUNT SERVICES 6783 STIRLING ROAD DAVIE, FL 33314

SUBJECT: MARTNICKS PHARMACY & DISCOUNT SERVICES, INC.

Ref. Number: P05000129113

We have received your document for MARTNICKS PHARMACY & DISCOUNT SERVICES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Our records indicate Mary J. Onyenwe is also listed as Secretary/Director. If you wish her name removed from these positions, please make the correction on the resignation form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 412A00011656



FILED

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

12 MAY 29 PM 4: 59
V
SECRETARY OF STATE
FALLAHASSEE MLCRIDA

I, _	MARYTANE ONTENWE, hereby resign as VICE PRESIDENT, D. (Title) SE	IRECTOR CRETARY
of_	MARTNICKS PHARMACY & DISCOUNT SUCS. INC. (Name of Corporation)	,
	(Document Number, if known), a corporation organized under the laws of the State of A	dg.

(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