M180000 12258

| (Requ | lestor's Name) |
|------------------------------|------------------------|
| (Addre | ess) |
| (Addre | ess) |
| (City/S | State/Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| (Busin | ness Entity Name) |
| (Docu | ment Number) |
| Certified Copies | Certificates of Status |
| Special Instructions to Fili | ing Officer |
| | |
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| | |

Office Use Only



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TRANSMITTAL LETTER

Martin County Fair Association SUBJECT: (Name of Corporation) N18000012258 DOCUMENT NUMBER:___ The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Chester Edwards (Name of Person) Martin County Fair Association (Name of Firm/Company) 2616 SE Dixie Hwy (Address) Stuart, Fl 34996 (City/State and Zip Code) For further information concerning this matter, please call: Chester Edwards (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| | Chester Edwards | President | | |
|---|-----------------------------|-----------------------------------|----------------------|--|
| | | hereby resign as | (Title) | |
| | Martin County Fair Asso | ciation | | |
| | (Name of Corporation) | | | |
| | N18000012258 | a corporation organized under the | laws of the State of | |
| | (Document Number, if known) | | | |
| | Florida | | | |
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FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 SLUP TOF STATE FALL FOR SSEE, FLORIDA

FILED