U180000 laa58

(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



600445400496

02/26/25--01011--007 ^^35.00



TRANSMITTAL LETTER

Division of Corporations		
Martin County Fair Association SUBJECT:(N	ame of Corpe	oration)
DOCUMENT NUMBER: N18000012258	unic or corp.	<i>station</i>
		1.6 1.6 61
The enclosed Officer/Director Resignation for	a Corporation	on and fee are submitted for filing.
Please return all correspondence concerning th	is matter to	the following:
Joy Warren		
(Name of Person)		_
Martin County Fair Association		
(Name of Firm/Company)		-
2616 SE Dixie Hwy		
(Address)	 	_
Stuart, FI 34996		
(City/State and Zip Code)		_
For further information concerning this matter,	, please call:	
Joy Warren	772	528-0279
(Name of Person)	(Area Co) de & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to	o the Florid	a Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amen Divisi The C 2415	Address: dment Section fon of Corporations centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303

TO: Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Joy Warren	1st. Vice President , hereby resign as
	(Title)
	County Fair Association
4)	Name of Corporation)
N18000012258	, 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

2025 FEB 26 AM S: 25 SECTION OF STATE TALL MANSSEE, FLORIDA

, ברני הרני