

N23000007473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

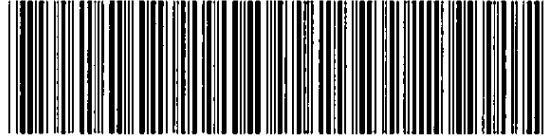
(Business Entity Name)

(Document Number)

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11/30/23--01028--014 **35.00

2023 NOV 30 AM 7:57

12/12/2023

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MAKING A'S PAYS INC.

(Name of Corporation)

DOCUMENT NUMBER: N23000007473

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

Please return all correspondence concerning this matter to the following:

Gina Pierre

(Name of Person)

(Name of Firm/Company)

401 West Atlantic Ave

(Address)

Delray Beach, FL 33444

(City/State and Zip Code)

For further information concerning this matter, please call:

Gina Pierre

561

374-1611

(Name of Person)

at (

_____)
(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:

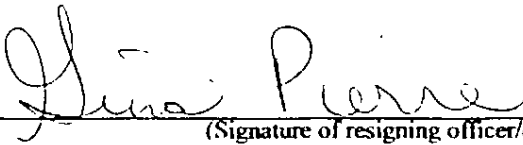
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Gina Pierre, hereby resign as Director
(Title)

of MAKING A'S PAYS INC.
(Name of Corporation)

N23000007473, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

2023.11.30 11:17:57

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