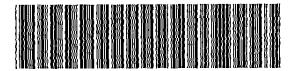
## N92000000900

(Re	questor's Name)	
/Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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SECRETARY OF SUATES



Amendment Section Division of Corporations

TO:

## TRANSMITTAL LETTER

SUBJECT: The Marion E.	(Name of Corporation)
DOCUMENT NUMBER:_	N92000000900
The enclosed Officer/Directo	r Resignation for a Corporation and fee are submitted for filing
Please return all corresponde	nce concerning this matter to the following:
William P. Dillon, Esq.	
(Name	of Person)
McMorrow & Dillon, P.A.	
(Name of F	imn/Company)

2590 Golden Gate Parkway, Suite 108

(Address)

Naples, Florida 34105

(City/State and Zip Code)

For further information concerning this matter, please call:

William Dillon at (239 ) 434-6500 (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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Sharon B. Aragona	, hereby resign as (Title)
of The Marion E. Fether Foundat	tion, Inc.
N92000000900 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	<u></u>
Sh	Signature of resigning officer/director)
	ASSEE, PH 2

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

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, Florida 32314