P00000005950

(Requestor's Name)
(Address)
(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



600275955316

08/14/15--01008--008 **35.00

15 AUG 14 AM 8: 53

AUG 17 2015 C LEWIS

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: M & M Process Inc.

(Name of Corporation)

DOCUMENT NUMBER: PODOOOOS95D

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

Please return all correspondence concerning this matter to the following:

Michael J McMenamy

(Name of Person)

M & M Process Inc.

(Name of Firm/Company)

7801 Point Meadows Dr. Unit 1106

(Address)

Jacksonville, FL 32256

(City/State and Zip Code)

For further information concerning this matter, please call:

Olga McMenamy

.,,904

737-5494

(Name of Person)

(Area Code & Daytime Telephone Number)

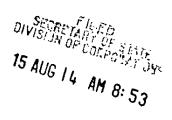
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address:**

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



_{ı,} Michael J McMenamy	
	(Title)
_{of} M & M Process Inc.	
(Name of C	orporation)
Poolooo5950, a (Document Number, if known)	corporation organized under the laws of the State of
Florida	

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