

PO10000091479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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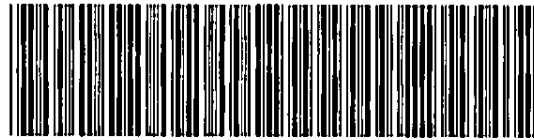
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

12/10/2022

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mair Properties, Inc.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P01000091479  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Karen L Mair  
\_\_\_\_\_  
(Name of Person)

Mair Properties, Inc.  
\_\_\_\_\_  
(Name of Firm/Company)

128 Broadmoor Drive  
\_\_\_\_\_  
(Address)

Flat Rock, NC 28731  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Karen L Mair  
\_\_\_\_\_  
(Name of Person) at (352) 223-1558  
(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, FERRANTE, LINDA D, hereby resign as Secretary/Treasurer  
(Title)

of Mair Properties, Inc.  
(Name of Corporation)

P01000091479, a corporation organized under the laws of the State of  
(Document Number, if known)

P01000091479

*Linda Ferrante*  
(Signature of resigning officer/director)

**FILED**  
2022 SEP -6 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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