P03000098193

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	ry/State/Zip/Phone	: #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Document Number)			
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Mineral City Partners Inc		
77777777	(Name of Corporation)	
DOCUMENT NUMBER: P03000098193		
The enclosed Officer/Director Resignation	n for a Corporation and fee are submitted for filing	
Please return all correspondence concerning	ng this matter to the following:	
Michael Matthews		
(Name of Person)		
Mineral City Partners Inc		
(Name of Firm/Company)	
P O Box 328		
(Address)		
Ponte Vedra Beach, FL 32004		
(City/State and Zip Code)	
For further information concerning this m	atter, please call:	
Michael Matthews	at (941 538-3265 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made paya	able to the Florida Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Chris Monti	Vice Presi hereby resign as	Vice President, hereby resign as	
	, nereby tesign as	(Title)	
Mineral City Partners Inc			
	(Name of Corporation)		
P03000098193	, a corporation organized under the l	aws of the State of	
(Doc ument N umber, if k	:nown)—·—		
Florida			
	·		
	Λ ¬ — — — — — — — — — — — — — — — — — —		
	Cmonte		
	(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

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