P05000051391

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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M/Di Resign

10 FEB 26 AM ID: 10

COVER LETTER

	TO: Amendment Section Division of Corporations	
	SUBJECT: VINCENT MARTINEZ CORP	
	(Name of Corporation)	
	DOCUMENT NUMBER: P05000051391	
	The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	a e c mag
	VINCENT MARTINEZ	
	(Name of Person)	
	VINCENT MARTINEZ CORP	
	(Name of Firm/Company)	
	3441 W. HILLSBORO BLVD L105	
	(Address)	
	COCONUT CREEK, FL 33073	
	(City/State and Zip Code)	
	For further information concerning this matter, please call:	
72:5	VINCENT MARTINEZ 954 \ 401-2426	
	(Name of Person) at (954) 401-2426 (Area Code & Daytime Telephone Number)	
	Enclosed is a check for \$35.00 made payable to the Florida Department of State.	
	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

10 FEB 26 AM 10: 10

MILARASSEE, FLORIDA

of VINCENT MARTINEZ CO	Name of Corporation)
P05000051391 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	·

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