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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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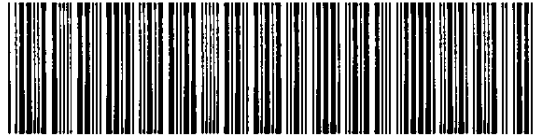
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
OFFICE OF THE  
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RECEIVED DEC 11 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MARTIN INC

CIN# 20-2752763 (Name of Corporation)

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

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

Please return all correspondence concerning this matter to the following:

SIVIA MURER

\_\_\_\_\_  
(Name of Person)

SUPERIOR BOOKKEEPING

\_\_\_\_\_  
(Name of Firm/Company)

PO BOX 2689

\_\_\_\_\_  
(Address)

PEACHTREE CITY, GA 30269

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

SIVIA MURER

\_\_\_\_\_  
(Name of Person)

at ( 678 ) 364-9441

\_\_\_\_\_  
(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**

I, JAIME LOPEZ, hereby resign as VICE-PRESIDENT  
(Title)

of MARTIN INC.  
(Name of Corporation)

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

FLORIDA

X   
(Signature of resigning officer/director)

FILED  
09 DEC -9 AM 11:40  
DIVISION OF STATE  
TALLAHASSEE, 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