

PO700123975

(Requestor's Name)

(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



300194058253

02/14/11--01011--017 **35.00

FILED
2011 FEB 14 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

2/15/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MIKE MARTIN AGENCY INC
(Name of Corporation)

DOCUMENT NUMBER: PO7000123975

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

Please return all correspondence concerning this matter to the following:

MIKE MARTIN
(Name of Person)

MIKE MARTIN AGENCY
(Name of Firm/Company)

425 CROSS ST STE 114
(Address)

PUNTA GORDA FL 33950
(City/State and Zip Code)

For further information concerning this matter, please call:

MIKE MARTIN at (941) 505-2530
(Name of Person) (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

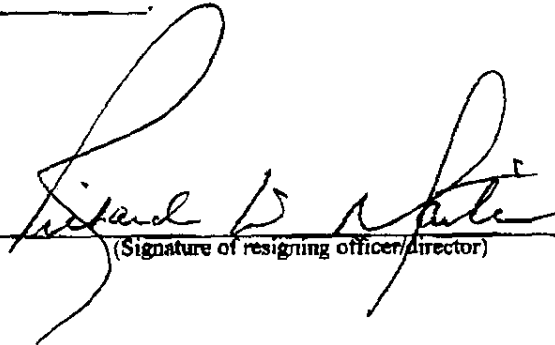
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, RICHARD D MARTIN, hereby resign as SECRETARY
(Title)

of MIKE MARTIN AGENCY INC
(Name of Corporation)

PO7000123975, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
2011 FEB 14 AM 11:59
SECRETARY 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