## P (UDD) 0095282

(Requestor's Name)		
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



100310805741

03/22/18--01025--003 \*\*140.00

2015 MAR 22 MIII: 22

ODRES

MAR 23 2018

I ALBRITTON

## TRANSMITTAL LETTER

3/14/18

**TO:** Amendment Section Division of Corporations

SUBJECT: SALTY PRINTING MOTHERSHIP (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P16000095282
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
CAPOLINE D GRIMES (Name of Person)
Name of Firm/Company)
(Name of Firm/Company)
1904 Znd OWE W (Address)
(Address)
Bradenton, Fr. 34709 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (941) 812-U4SY (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
2661 Executive Center Circle
Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

3/14/18

I, CAROLINE D GRIMES, hereby resi	gn as President (Title)
of SALTY PRINTING MOTHERSHIP (C) (Name of Corporation)	orporation,
DIL appage -as	zed under the laws of the State of
FORIDA.	
Carblin Signature of resigning office	A Section Sect
(Signature of resigning office	er/director)
FILING FEE IS \$35.0	0 20 20

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314