

PIS00000 8014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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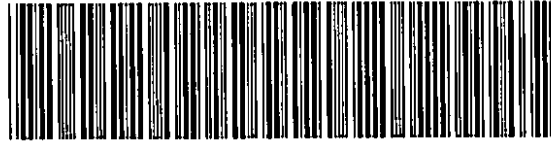
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: **BH MARTINS PAVERS INC**

(Name of Corporation)

DOCUMENT NUMBER: **P18000008014**

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

Please return all correspondence concerning this matter to the following:

**KRISTIN MARTINS**

(Name of Person)

**BH MARTINS PAVERS INC**

(Name of Firm/Company)

**3831 NW 81ST TER**

(Address)

**CORAL SPRINGS FL 33065**

(City/State and Zip Code)

For further information concerning this matter, please call:

**KRISTIN MARTINS**

(Name of Person)

at ( **954** ) **683-2358**

(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**

I, KRISTIN MARTINS, hereby resign as DIRECTOR */ Registered Agent.*  
(Title)

of BH MARTINS PAVERS INC  
(Name of Corporation)

P18000008014, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

*Kristin Martins*  
(Signature of resigning officer/director)

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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