

P20000085045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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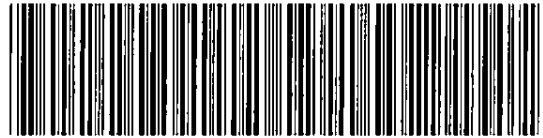
(Business Entity Name)

(Document Number)

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R. HUNT

04/02/24

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** IDEAL FARM OF FLORIDA INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P20000085045  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

ALBERT W RODRIGUEZ  
\_\_\_\_\_  
(Name of Person)

IDEAL FARM OF FLORIDA INC  
\_\_\_\_\_  
(Name of Firm/Company)

21150 SW 127 PL  
\_\_\_\_\_  
(Address)

MIAMI, FL 33177  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

ALBERT W RODRIGUEZ at (786) 412-7124  
\_\_\_\_\_  
(Name of Person) (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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303


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**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, ELIAN CABRERA MARTINEZ, hereby resign as VICEPRESIDENT  
(Title)

of IDEAL FARM OF FLORIDA INC  
(Name of Corporation)

P20000085045, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

  
(Signature of resigning officer/director)

7:00 PM 2:28  
STATE  
TALLAHASSEE, FL

**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