745000094394

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	

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C. CARROTHERS

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Affron Supply Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>P95000094394</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Michelle M Affron (Name of Person)
Affron Supply Inc. (Name of Firm/Company)
4033 Dorado Drive (Address)
Palm Beach Gardens Pa 33418 (City/State and Zip Code)
For further information concerning this matter, please call:
Michelle M Affron at (561) 385-4132 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Michelle M Affron	, hereby resign as	V. P. (Title)	
of Affron Supply	Inc.		
P9500094394 (Document Number, if known)	_, a corporation organized unde	r the laws of the State of	
FLorida			
Michely	ignature of resigning officer/director	2016	
		AR 21 HASSET	
		PH 5: 3	ا!

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

FILING FEE IS \$35.00

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