

P05000077131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

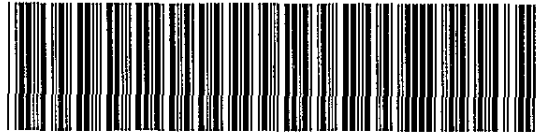
(Business Entity Name)

(Document Number)

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MICHIGAN SECRETARY OF STATE

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FOUR SEASONS PIZZA, INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000077131

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

John Sakellarides, Esq.
(Name of Person)

Herdman & Sakellarides, P.A.
(Name of Firm/Company)

2595 Tampa Road, Suite J
(Address)

Palm Harbor, FL 34684
(City/State and Zip Code)

For further information concerning this matter, please call:

John Sakellarides, Esq. at (727) 785-1228
(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
409 E. Gaines Street
Tallahassee, FL 32399

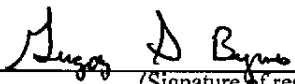
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
05 JUN 10 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Gregory Byrnes, hereby resign as Treasurer, Director
(Title)

of FOUR SEASONS PIZZA, INC.
(Name of Corporation)

P05000077131, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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