## 180000 9 1636

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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## **COVER LETTER**

SUBJECT: South	ern Comfort Grill, Inc.
	(Name of Corporation)
DOCUMENT NUM	MBER: P06000091636
The enclosed Office	r/Director Resignation for a Corporation and fee are submitted for filing
Please return all cor	respondence concerning this matter to the following:
Barbara J. Nico	
	(Name of Person)
Southern Comfor	t Grill, Inc.
1)	Name of Firm/Company)
3945 62nd Avenu	
	(Address)
Vero Beach, Flori	da 32966
((	City/State and Zip Code)
For further informat	ion concerning this matter, please call:
Barbara J. Nico	at ( 772 ) 538-1075  (Area Code & Daytime Telephone Number)
, (Nam	e of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check	for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	er Circle Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

MINAUG 19 MM 9: 15

I. Nick E. Nico, Jr.	, hereby resign as_PVST	
	(Title)	
of Southern Comfort Grill, Inc.		
(Nai	me of Corporation)	
P06000091636 (Document Number, if known)	, a corporation organized under the laws of the State of	
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