P14000034683

(Re	equestor's Name)	***
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
	•	
(Bu	siness Entity Na	me)
	·	,
(Do	cument Number)	
(
Certified Copies	Certificate	s of Status
Certified Copies	_ Certificate:	S OI Status
		<u> </u>
Special Instructions to	Filing Officer:	
		ŀ

Office Use Only



900263679549

03/08/14--01012--014 **35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROYEO AND FILEO



TRANSMITTAL LETTER

Amendment Section Division of Corporations TO:

ĩ

SUBJECT: CURRY FORD PIZZA COMPANY, INC. (Name of Corporation)
DOCUMENT NUMBER: <u>P14000034683</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:
FRANK FERRARA (Name of Person)
CURLYFORD PIZZA COMPANY TAC (Name of Firm/Company)
3020 LAMBERTON BILL SUITE 101 (Address)
ORLANDO FC 32825 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (321) 206-8377 (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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ORGILIO M AIFONSO, hereby resign as PAESIDENT (Title)
(Title)
of CURRYFORD PIZZA COMPANY, INC. (Name of Corporation)
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

SECRETARY OF STATE

APPROVED