(Re	equestor's Name)	
(Ac	dress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	<u></u> fíMAIL
(Business Entity Name)		
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At 120 Reg

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COVER LETTER

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TO: Amendment Section Division of Corporations

(Name of Person)	t (Area Code & Daytime Telephone Number)
MARK RICHMAN	305 661-2525
For further information concerning this matter,	please call:
(City/State and Zip Code)	
SOUTH MIAMI, FL 33143	
(Address)	
5829 SW 73RD STREET #1	
(Name of Firm/Company)	
BEVERLY HILLS CAFE, INC.	
(Name of Person)	
MARK RICHMAN	
Please return all correspondence concerning thi	is matter to the following:
The enclosed Officer/Director Resignation for	a Corporation and fee are submitted for filin
DOCUMENT NUMBER:	
	ame of Corporation)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

JERROLD I HORWITZ I,	TREASURER, hereby resign as
1,	(Title)
BEVERLY HILLS CAFE, INC.	
(Name of Corp	oration)
606856, a co	orporation organized under the laws of the State of
(Document Number, if known)	
FLORIDA	-^
(Signatur	e 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