onda Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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From:

Account Name : FOX ROTHSCHILD LLP

Account Number : I20130000024 Phone : (215)299-2162

Fax Number : (215)299-2150

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

jmiranda@foxrothschild.com Email Address:___

REGISTERED AGENT RESIGNATION P.B. PIZZA SYSTEMS, INC.

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Adam J Lamb (Name of Registered Agent)	
	(i military in gives in 20)
hereby resigns as Registered Agent	P.B. Pizza Systems, Inc.
netery resigns at Neginores 1 species	(Name of Coperato)
J81696	
(Document Number, if known)	
A copy of this resignation was mai	iled to the above listed corporation at its last known address.
The agency is terminated and the of this statement is filed.	office discontinued on the 31st day after the date on which
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
-	(Typed or Printed Name)
	<u> </u>
	Carriy
	i,t Z
Fee for	r filing this document:

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314