

M19619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

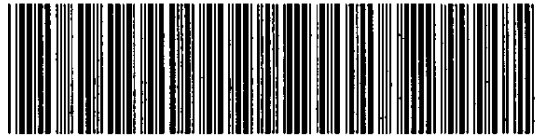
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300161217893

10/07/09--01009--007 **70.00

FILED
09 OCT - 7 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. Coulliette
C.COULLIETTE

OCT 09 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PIZZA POINT, INC.

(Name of Corporation)

DOCUMENT NUMBER: M19619

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 COETZEE

(Name of Person)

(Name of Firm/Company)

859 NE 115 ST.

(Address)

MIAMI, FL 33161

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN COETZEE

(Name of Person)

at (786) 586-9731

(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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

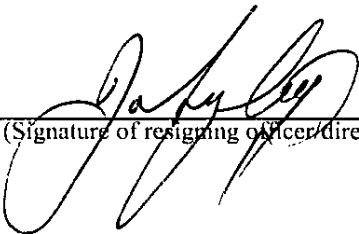
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JOHN COETZEE, hereby resign as PRESIDENT
(Title)

of PIZZA POINT, INC.
(Name of Corporation)

M19619, 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

FILED
09 OCT -7 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314