## N08000009367

(R	equestor's Name)	
(Address)		
(Address)		
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: OKTOBERFEST MI.	AMI FOUNDATION, INC. (Name of Corporation)
N080	000009367
DOCUMENT NUMBER:	
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing
Please return all correspondence cor	ncerning this matter to the following:
Mark S. Scott	
(Name of Pers	on)
K&L Gates	
(Name of Firm/Co	mpany)
200 South Biscayne Blvd., Suite	∍ 3900
(Address)	
Miami, FL 33131	
(City/State and Zip	Code)
For further information concerning	this matter, please call:
David Baghdassarian	at ( 305 ) 539-3371 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e 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, UNAI URTIZBEREA	, hereby resign as Director (Title)
OKTOBERFEST MIAMI FOUNDATION, (Name of Corporation)	on) Property of the contract o
N0800009367 , a corpor	ration organized under the laws of the State 5.
Florida  (Signature of p	AM 10: 23  EE, FLORIDA  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