



**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** OPTIONS CAFE INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** NI8000002748

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SREEDHAR GOURAVELLI  
(Name of Person)

OPTIONS CAFE INC.  
(Name of Firm/Company)

10616 CORY LAKE DR  
(Address)

TAMPA, FL 33647  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sreedhar Gouravelli at (773) 263-7521  
(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, SREEDHAR GOURAVELLI, hereby resign as VP  
(Title)

of OPTIONS CAFE INC  
(Name of Corporation)

N18000002748, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA (FL)

*Sreedhar Gouravelli* (Sreedhar Gouravelli)  
(Signature of resigning officer/director)  
7/19/2018

**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

2018 JUL 28 PM 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED