P02000058014

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Africar Resignation

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TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SDB.	JECT: TASTE A CULINARY ADVENTURE INC.
	(Name of Corporation)
DOC	UMENT NUMBER: P02000058014
The c	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	se return all correspondence concerning this matter to the following:
Rick	hard W. Reichle
	(Name of Person)
Tas	ste A Culinary Adventure Inc.
	(Name of Firm/Company)
832	26 S.E. Woodcrest Place
	(Address)
Hob	pe Sound, FL 33455
	(City/State and Zip Code)
For f	urther information concerning this matter, please call:
Rich	nard Reichle at (772) 546-7785 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divis P.O.	ing Address: Indiment Section Sion of Corporations Box 6327 Shassee FL 32314 Division of Corporations Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee FL 32399

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Dan Dyack	, hereby resign as Vice President
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Title)
of TASTE A CULINARY A	OVENTURE INC.
	(Name of Corporation)
P02000058014 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	

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