

P020000096513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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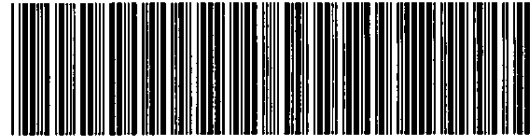
(Business Entity Name)

(Document Number)

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900227834779

*Resignation
of officer*

04/09/12--01032--018 **201.25

FILED
2012 APR -9 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*DOE
4/16/12*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LE BON CAFE, INC

(Name of Corporation)

DOCUMENT NUMBER: P02000096513

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

Please return all correspondence concerning this matter to the following:

LAZARO P FUENTES

(Name of Person)

(Name of Firm/Company)

1533 LARAMIE CIRCLE

(Address)

VIERA/FLORIDA 32940

(City/State and Zip Code)

For further information concerning this matter, please call:

LAZARO P FUENTES

(Name of Person)

at (321) 544-3271

(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**

FILED
2012 APR -9 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, YASMIN C JARMAN, hereby resign as DIRECTOR
(Title)

of LE BON CAFE, INC
(Name of Corporation)

P02000096513, 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

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

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