

PO4000018374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

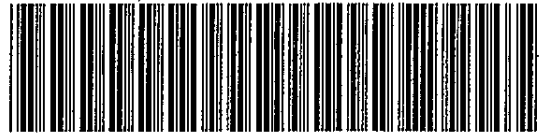
(Document Number)

Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



000042708490

11/22/04--01007--008 **35.00

04 NOV 22 PM 1:31
SECRETARY OF STATE
ALL AMERICAN FLOOR

FILED

10/10/2004
DD

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NUNEZ RESTAURANT INC.
(Name of Corporation)
Po4000018374

DOCUMENT NUMBER:

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

Please return all correspondence concerning this matter to the following:

Alisa S. NUNEZ
(Name of Person)

NUNEZ Restaurant Inc.
(Name of Firm/Company)

7749 Apple Dr.
(Address)

JACKSONVILLE, FL 32211
(City/State and Zip Code)

For further information concerning this matter, please call:

Alisa NUNEZ at 904, 525-4254
(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

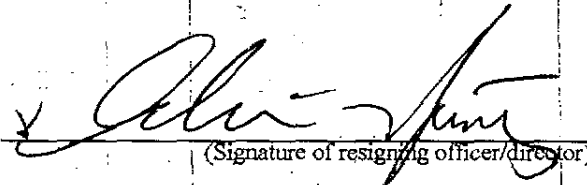
FILED
04 NOV 20 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ALICIA S NUNEZ, hereby resign as CHAIRMAN OF THE BOARD
(Title)

of NUNEZ RESTAURANT INC.
(Name of Corporation)

P04000018374 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