

PD4000086556

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

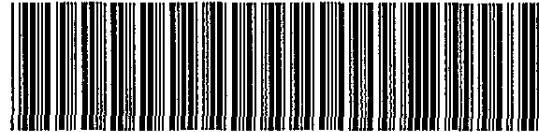
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CLERK OF DISTRICT COURT

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESTAURANT CONCEPTS & VENTURES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000086556

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

Please return all correspondence concerning this matter to the following:

HECTOR ALEJANDRO ROLOTTI

(Name of Person)

(Name of Firm/Company)

1080 ALTON ROAD

(Address)

MIAMI BEACH, FL 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

HECTOR A. ROLOTTI

(Name of Person)

at (305) 531-8100

(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

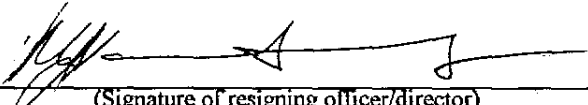
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, NOEMI C. PIVA, hereby resign as SECRETARY
(Title)

of RESTAURANT CONCEPTS & VENTURES, INC.
(Name of Corporation)

P04000086556, 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

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TALLAHASSEE, FLORIDA