

PO40000128819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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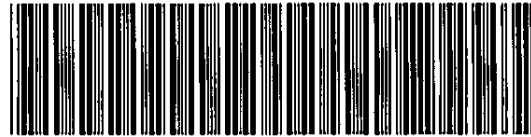
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LITTLE CAESARS OF PALM BEACH, INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000128819

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

Please return all correspondence concerning this matter to the following:

Louis Elost

(Name of Person)

Little Caesars Of Palm Beach

(Name of Firm/Company)

11987 Fox Hill Circle

(Address)

Boynton Beach, FL 33473

(City/State and Zip Code)

For further information concerning this matter, please call:

LOUIS ELOSTA

(Name of Person)

at 561 281-1727

(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

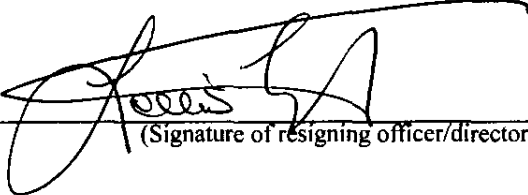
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Louis Elost, hereby resign as President
(Title)

of LITTLE CAESARS OF PALM BEACH, INC.
(Name of Corporation)

P04000128819, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

2/24/2014

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 FEB 26 PM 11:17

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