## P05000068899

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	Moumouris Foods, Inc. (Name of Corporation)		
(Name of Corporation)			
DOCUMENT NUMBER:	P05000068899		
The enclosed Officer/Director Resignation for	or a Corporation and fee are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
Spiros T. Moumouris (Name of Person)			
(Name of 1 cison)			
Moumouris Foods, Inc. (Name of Firm/Company)	÷		
2714 N. Dellwood Dr. (Address)	re		
(Address)			
Eushs, FL 32726 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matt	er, please call:		
Kierston Moumouris	at (352) 504-5868 (Area Code & Daytime Telephone Number)		
(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00 made payable	to the Florida Department of State.		
Amendment Section Amend Division of Corporations Divisio Clifton Building Post O	g Address: ment Section n of Corporations ffice Box 6327 ussee, FL 32314		

## OFFICER / DIRECTOR RESIGNATION FILED FOR A CORPORATION 05 NOV -4 AM II: 20

TALLAHASSEE, FLORIDA

I,	Kierston Maumouris	, hereby resign as	Via President
			(Title)
of_		mouris Foods Inc.	
	(Nam	ne of Corporation)	
	P05000068899 (Document Number, if known)	, a corporation organized unde	r the laws of the State of
	Florida	<del></del> ·	
		Kreiston B. Moumonus	
		(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