PD6000080819

| | (Requestor's Name) | | | |
|---|---|--|--|--|
| | (Address) | | | |
| | (Address) | | | |
| | (City/State/Zip/Phone #) | | | |
| | PICK-UP WAIT MAIL | | | |
| Ì | (Business Entity Name) | | | |
| | (Document Number) | | | |
| | Certified Copies Certificates of Status | | | |
| | Special Instructions to Filing Officer: | | | |
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97 OCT 26 AM 10: 04 SECRETARY OF STATE FALLAHASSEE, FLORIDA



COVER LETTER

| TO: | Amendment Section | | |
|-----|--------------------------|--|--|
| | Division of Corporations | | |

| SUBJECT: Geno's Italian Restaurant, Inc. (Name of Corporation) | | | | |
|--|--|--|--|--|
| (Name of Corporation) | | | | |
| 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: | | | | |
| Jaxon Schumacher (Name of Person) | | | | |
| Geno's Italian Restaurant, Inc. | | | | |
| (Name of Firm/Company) | | | | |
| 9276 North Davis Hwy, | | | | |
| (Address) | | | | |
| Pensacola, FL 32514 | | | | |
| (City/State and Zip Code) | | | | |
| For further information concerning this matter, please call: | | | | |
| Linda Schumacher at (850) 477-2912 (Name of Person) (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.

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

| I,Jaxon Schumacher | , hereby resign as | Director |
|---------------------------------------|------------------------|--|
| | | (Title) |
| Geno's Italian F | | |
| (Name of Corpora | mon) | |
| PO(DOCUMENT Number, if known), a corp | oration organized unde | r the laws of the State of |
| Florida | | |
| (Signature o | Thua h | OTOCT 26 AM 10: 04 SECRETARY OF STATE TALLAHASSEE. FLORIOL |

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