P06000111916

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	· #)
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: L & H FOOD MART INC
(Name of Corporation)
DOCUMENT NUMBER: P06000111916
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LATIFUL KABIR
(Name of Person)
(Name of Firm/Company)
(Address) TAMPA, FL 33615 (City/State and Zip Code) (City/State and Zip Code)
(Address)
TAMPA, FL 33615 (learwater 4). 33755
(City/State and Zip Code)
For further information concerning this matter, please call:
LATIFUL KABIR at (8/3) 770 - 8990
(Name of Person) at (8/3) 770 - 8990 (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, LATIFUL KABIR	, hereby resign as PRESIDENT		
	(Title)		
of_L&H FOOD MART INC.			
(Na	me of Corporation)		
P06000111916 (Document Number, if known)	, a corporation organized under the laws of the State of		
FLORIDA	·		
	SECRET T		
	(Signature of resigning officer/director) SET OF STATE O		

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