P0700099141

(Re	questor's Name)		_
(Ad	dress)		-
(Ad	dress)		-
(Cit	y/State/Zip/Phon	e #)	-
PICK-UP	☐ WAIT	MAIL .	
(Ви	siness Entity Nar	me)	-
(Do	cument Number)		_
Certified Copies	_ Certificates	s of Status	-
Special Instructions to	Filing Officer:]
			^

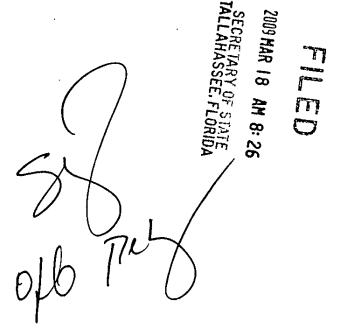


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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	MAMMA MIA PIZZA OF GAINESVILLE INC
	(Name of Corporation)
DOCUMENT NUMBER:	P07000098141
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing.
Please return all corresponden	ce concerning this matter to the following:
ANA M	SAVONA
(Name o	f Person)
MAMMA MIA PIZZA O	F GAINESVILLE INC
(Name of Fi	rm/Company)
490 23	RD AVE
(Add	lress)
GAINESVILL	_E, FL 32606
(City/State a	nd Zip Code)
For further information concer	rning this matter, please call:
ANA M SAVONA	352 376 3444
(Name of Perso	at (352) 376 3444 (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, STELLA BURGETTO	, hereby resign as VICE PRESIDENT/TREASUM	(ER
7	(Title)	
01	ZZA OF GAINESVILLE INC	
(1)	Name of Corporation)	
P07000098141 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	SECRETARY OF STATALLAHASSEE, FLOR	
	(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