

PO7000134499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

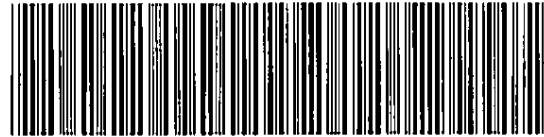
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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11/02/18--01001--004 **35.00

NOV 02 2018
S. YOUNG

RECEIVED
SECRETARY OF STATE
18 NOV - 1 PM 3:58
TALLAHASSEE, FLORIDA
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SY

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

BADBOYBURRITO, INC.

Signature _____

Requested by: SETH

11/01/18

Name

Date

Time

Walk-In

Will Pick Up

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BADBOYBURRITO, INC.
(Name of Corporation)

DOCUMENT NUMBER: P07000134499

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

Please return all correspondence concerning this matter to the following:

THERESA HEIDENREICH
(Name of Person)

(Name of Firm/Company)

3330 Eagle Avenue
(Address)

Key West, FL 33040
(City/State and Zip Code)

For further information concerning this matter, please call:

Theresa Heidenreich at (305) 292-2697
(Name of Person) (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, CHRIS OTTEN, hereby resign as OFFICER & DIRECTOR
(Title)

of BADBOYBURRITO, INC.
(Name of Corporation)

P07000134499, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

DocuSigned by:
Chris Otten
AE126AF0705942E (Signature of resigning officer/director)

FILED
18 NOV -1 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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