

P10000100513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

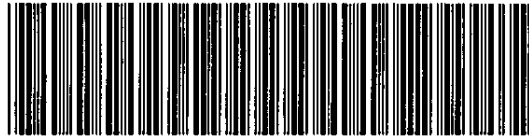
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



60028011166

12/18/15--01008--010 **35.00

FILED
15 DEC 18 AM 8:15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ADPES.

DEC 21 2015

R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EL PINARENO RESTAURANT CORP.
(Name of Corporation)

DOCUMENT NUMBER: P10000100513

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

Please return all correspondence concerning this matter to the following:

JOSE ERIGOYEN
(Name of Person)

(Name of Firm/Company)

1971 NW 17 AVENUE
(Address)

MIAMI, FL. 33125
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE ERIGOYEN at (786) 768-0854
(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

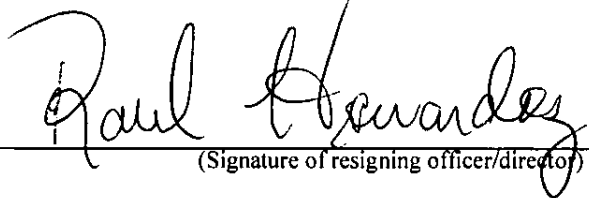
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, RAUL HERNANDEZ, hereby resign as PRESIDENT
(Title)

of EL PINARENO RESTAURANT CORP.
(Name of Corporation)

P10000100513, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 DEC 18 AM 8:15

FILED