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COVER LETTER

Divisi	sion of Corporations	
SUBJECT:_	Zomo's Arepizza + Fruit. (Name of Corporation)	
DOCUMEN	T NUMBER: P11000010421	
The enclosed	Officer/Director Resignation for a Corporation and fee are submitted for	filing.

Please return all correspondence concerning this matter to the following:

Andres Giroldo (Name of Person)
(Name of Ferson)
(Name of Firm/Company)
1501 Windorah Way Apt B. (Address)
(Address)
West Polm Beach F2. 33411 (City/State and Zip Code)
(City/State and Zip Code)

For further information concerning this matter, please call:

Andres Girolss. at (561) 693-7881 (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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

PALLAHASSEE, FLORIDA

I, Andres	Giraldo	, hereby res	ign as	P. (Title)	
of Zomo's	Arepizza + (Name of Cor	Fruit poration)	Inc		,
P11000010 (Document Num		orporation organi	zed under the l	aws of the State of	of
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