

P11000010421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

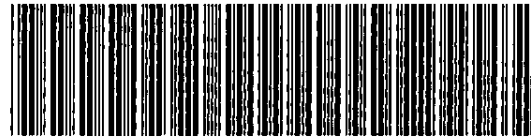
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
OCT 24 AM 8:19

C. Coulliette
C.COULLIETTE

OCT 25 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Zomos Orepizza + Fruit
(Name of Corporation)

DOCUMENT 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:

Edith M. Restrepo.
(Name of Person)

(Name of Firm/Company)

12978 Brookfield circle
(Address)

Orlando FL 32837.
(City/State and Zip Code)

For further information concerning this matter, please call:

X Edith M Restrepo. at ()
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Edith M Restrepo, hereby resign as D. (Title)

of Zomos Orepizza + Fruit.
(Name of Corporation)

P11000010421, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

x Edith M. Restrepo
(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

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