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COVER LETTER

SUBJECT: O'Connor's Irish Pob Co. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P \\ 0000 \\ 887
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Daniel P. O'Connor (Name of Person)
O'Connor's Irish Rub Co. (Name of Firm/Company)
Po Box 209 (Address)
Nokomis, FL 34274 (City/State and Zip Code)
For further information concerning this matter, please call:
Daniel P. O'Connor at (941) 716-4819 (Name of Person) at (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Suzanne N. O'Car	hereby resign as	Secretary
		(Tile)
of O'Connois Irish	PUB Co. ame of Corporation)	
P1100001/887 (Document Number, if known)	, a corporation organized ur	nder the laws of the State of
Florida	·	11 SB
		P-2
. 0	261	
_Suza	(Signature of resigning officer/direct	56 : 56

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