

P110000081702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

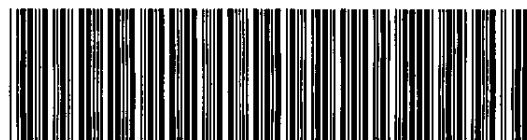
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200263649742

*Resignation
of officer*

09/08/14--01004--004 **35.00

FILED
2014 SEP -8 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*102
9/12/14*

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AVALON PARK PIZZA, INC
(Name of Corporation)

DOCUMENT NUMBER: P 11 0000 81702

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

Please return all correspondence concerning this matter to the following:

FRANK FERRARA
(Name of Person)

AVALON PARK PIZZA, INC
(Name of Firm/Company)

3831 AVALON PARK BLVD - SUITE E
(Address)

ORLANDO FL 32828
(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS VALDEZAMA at (321) 206-8377
(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**

FILED

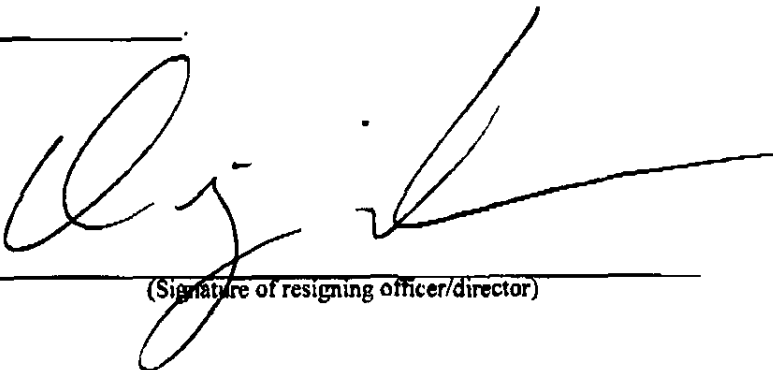
2014 SEP -8 AM 11:30

I, ORGILIO M ALFONSO, hereby resign as SECRETARY OF STATE
TALLAHASSEE, FLORIDA
70 (Title)

of AVALON PARK PIZZA, INC.
(Name of Corporation)

P11000081702, 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