

P12000009514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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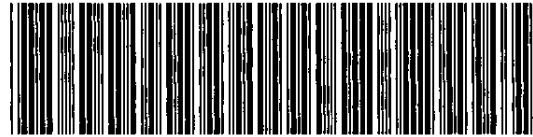
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

11/14/12

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Peja, Inc. / DBA: Slice of Life Pizzeria
(Name of Corporation)

DOCUMENT NUMBER: P12000009514

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

Please return all correspondence concerning this matter to the following:

Safet Mulaj
(Name of Person)

Peja, Inc. / DBA: Slice of Life Pizzeria
(Name of Firm/Company)

188 Mariner Blvd.
(Address)

Spring Hill, FL. 34609
(City/State and Zip Code)

For further information concerning this matter, please call:

Safet Mulaj at (446) 242. 0077
(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

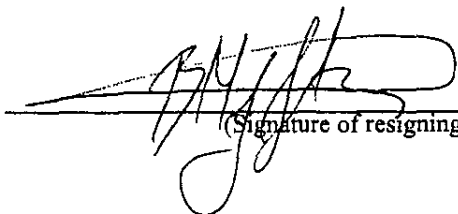
Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Besmir Myftari, hereby resign as VP
(Title)

of Peja, Inc. / DBA: Slice of Life Pizzeria,
(Name of Corporation)

P12000009514, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.


(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 NOV 13 AM 11:26

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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