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TO:	Amendment Section Division of Corporations			
SUBJ	JECT:	Shahi Catering, Inc.		
		(Name of Corporation)		
DOC	UMENT NUMBER:			
The e	nclosed Officer/Director Res	ignation for a Corporation and fee are submitted for filing.		
Pleas	e return all correspondence co	oncerning this matter to the following:		
	RIZWANA AIII	1 <i>ED</i>		
	(Name of Per	rson)		
	Shahi Caterir	ig, Inc.		
	(Name of Firm/C	ompany)		
	1400 NW 121	Ave		
	(Address))		
	Pembroke Pines,	FL 33026		
	(City/State and Z	ip Code)		
For fi	orther information concerning	this matter, please call:		
	Rizwana Ahmed	at (954) 432 - 6447 (Area Code & Daytime Telephone Number)		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclo	sed is a check for \$35.00 mag	de payable to the Florida Department of State.		
Amen Divisi Clifto 2661	t Address: Idment Section Idment Corporations In Building Executive Center Circle Itassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314		

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I.	Rizwana Ahmed	, hereby resign as	Director
<u></u>		,oo, rosign as	(Title)
of		Shahi Catering, Inc.	
	(Name	of Corporation)	
P10	e laws of the State of		
	Florida	<u>_</u> .	
		Right	
	(3	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