

P14000047076

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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STATE  
7:00

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MASON JAR CAFE II, INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P14000047076  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

JULIE RADO  
\_\_\_\_\_  
(Name of Person)

MASON JAR CAFE II, INC  
\_\_\_\_\_  
(Name of Firm/Company)

3000 NORTH FEDERAL HWY  
\_\_\_\_\_  
(Address)

FORT LAUDERDALE, FLORIDA 33306  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

JESUS RADO at (954) 3052789  
\_\_\_\_\_  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

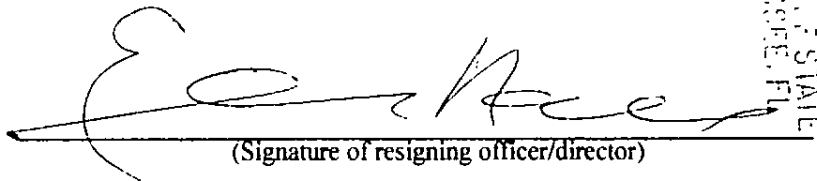
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JULIE RADO, hereby resign as VICE PRESIDENT  
(Title)

of MASON JAR CAFE II. INC  
(Name of Corporation)

P14000047076, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

STATE  
TALLAHASSEE, FL  
JUL 1 2012  
AM 7:00

**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