

P15000093384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

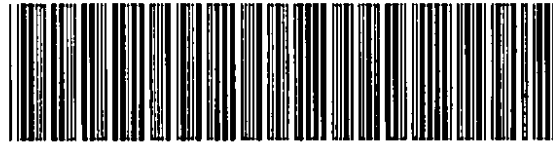
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Rizzo's Tobacco Emporium Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P150000 93384

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

Please return all correspondence concerning this matter to the following:

Dennis Licata  
(Name of Person)

Rizzo's Tobacco Emporium Inc.  
(Name of Firm/Company)

223 Orange Ave.  
(Address)

Fort Pierce, FL 34950  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jill Licata at ( 330 ) 501-8452  
(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

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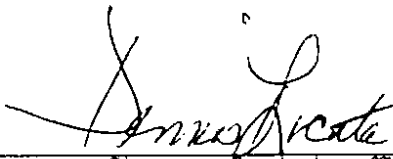
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Dennis LICATA, hereby resign as President  
(Title)

of Rizzo's Tobacco Emporium, Inc.  
(Name of Corporation)

P15000093384, 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

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