P16000012205

(Requestor's Name)
(Address)
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TRANSMITTAL LETTER

SUBJECT: WAYKUNA PERUVI	AN RE	STARUANT INC.
(Nar	ne of Corpor	ation)
DOCUMENT NUMBER: P16000012205	<u> </u>	
The enclosed Officer/Director Resignation for a	Corporation	and fee are submitted for filing.
Please return all correspondence concerning this	matter to th	e following:
CELIA MEZA DUSEK		
(Name of Person)	·· , ,,,	
(Name of Firm/Company)	 .	
9537 WELDON CIRCLE #	<i>‡</i> I 205	
(Address)		•
TAMARAC, FLORIDA 333	21	
(City/State and Zip Code)		
For further information concerning this matter, p	olease call:	
MARIO CAMPOS	954	292-8778
(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

TO:

Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, CELIA MEZA DU	SEK OFFICER/VP (Title)
O1	JVIAN RESTAURANT INC.
P16000012205	lame of Corporation)
(Document Number, if known) FLORIDA	, a corporation organized under the laws of the State of

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