

P16000017262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000299978630

06/05/17--01029--011 \*\*35.00

JUN 07 2017

S. YOUNG

SECTION 1910 STATE  
TALLAHASSEE, FLORIDA

17 JUN -5 PM 3:59

FILED

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MAYAN CAFE INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P16000017262

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

Please return all correspondence concerning this matter to the following:

CAROLINA I LOPEZ MENDOZA  
(Name of Person)

MAYAN CAFE INC  
(Name of Firm/Company)

27031 LAVINKA ST  
(Address)

BONITA SPRINGS, FL 34135  
(City/State and Zip Code)

For further information concerning this matter, please call:

JULIO MENDEZ at (239) 440-5557  
(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, CAROLINA I LOPEZ MENDOZA, hereby resign as VICE PRESIDENT  
(Title)

of MAYAN CAFE INC  
(Name of Corporation)

P16000017262, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Carolina I. Lopez  
(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

FILED  
17 JUN -5 PM 3:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA