

P19000005489

(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



900363980649

04/16/21--01022--002 **35.00

FILED
2021 MAR 16 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FL

OD / Resignation

OH
4/16/21

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Los Reyes Mexican Grill, Inc
(Name of Corporation)

DOCUMENT NUMBER: PI9000005489

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

Please return all correspondence concerning this matter to the following:

Jose Reyes
(Name of Person)

Los Reyes Mexican Grill, Inc
(Name of Firm/Company)

658 West Ave
(Address)

Clermont, FL 34711
(City/State and Zip Code)

For further information concerning this matter, please call:

Claudia Reyes at (407) 921-7520
(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, Jose Reyes, hereby resign as president
(Title)

of Los Reyes MEXICAN GRILL, Inc
(Name of Corporation)

P19000005489, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Jose Reyes
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FL

2021 MAR 16 AM 10:58

FILED

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