

# P96000082371

|                                                                     |         |
|---------------------------------------------------------------------|---------|
| Requestor's Name                                                    |         |
| Jaime & Lupe Delgadillo<br>831 Altavista Terrace<br>Davie, FL 33325 |         |
| City/State/Zip                                                      | Phone # |

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-04/25/97--01046--001  
\*\*\*\*\*70.00 \*\*\*\*\*35.00  
Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
APR 25 1997  
AM 10:14

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

| NEW FILINGS              |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit            |
| <input type="checkbox"/> | NonProfit         |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication     |
| <input type="checkbox"/> | Other             |

| AMENDMENTS               |                                        |
|--------------------------|----------------------------------------|
| <input type="checkbox"/> | Amendment                              |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/> | Dissolution/Withdrawal                 |
| <input type="checkbox"/> | Merger                                 |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

DID Resig.

5/2/97

38



Florida Department of State, Jim Smith, Secretary of State  
AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

FILED STATE  
SECRETARY OF CORPORATIONS  
97 APR 25 AM 10:14

STATE OF FLORIDA  
COUNTY OF DADE

I, JAMES DELGADO after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:

I, JAMES DELGADO hereby resign as DIRECTOR-SECRETARY-TREASURER  
(Title)

JOHN CAMPAINO'S BROWNSHEDS AND RESTAURANTS, INC., a Florida corporation;  
(Name of Corporation)

That the corporation has been notified in writing of the resignation.

[Signature]  
Signature of resigning officer/director

Sworn to and subscribed before me this 5th day of February 1997.

[Signature]  
NOTARY PUBLIC

My Commission Expires: \_\_\_\_\_



Ileana M. A. Vazquez  
MY COMMISSION # CC574104 EXPIRES  
August 08, 2000  
BONDED THRU TROY FARM INSURANCE, INC.

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 0327, TALLAHASSEE, FL 32314  
CR2EO44 (7-90)