

P970000000899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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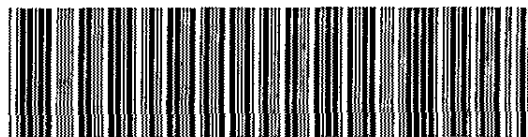
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

O: Amendment Section
Division of Corporations

SUBJECT: CA ENGLUND'S DELI
(Name of Corporation)

DOCUMENT NUMBER: P97000000899

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

Please return all correspondence concerning this matter to the following:

CHARLES ENGLUND
(Name of Person)

CA ENGLUND'S DELI INC
(Name of Firm/Company)

633 DANIELS DRIVE
(Address)

NORTH FORT MYERS FL 33917
(City/State and Zip Code)

For further information concerning this matter, please call:

JAROL R ENGLUND at (239) 656-0473
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Hilton Building
661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**


FILED
07 SEP 24 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, CHARLES ENGLUND, hereby resign as Director
(Title)

of C.A. ENGLUND'S DELI, INC.
(Name of Corporation)

P97000000899, 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