P99000032128

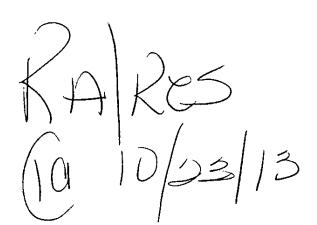
(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	,
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	:
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI	ECT: FMM Restaurant, Inc.
DOCU	(Name of Corporation) JMENT NUMBER: P99000032128
The en	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Rut	th A. Martell (Name of Person)
BDI	B Agent Co. (Name of Firm/Company)
380	0 Embassy Parkway, Suite 300 (Address)
Akr	on, OH 44333 (City/State and Zip Code)
For fur	rther information concerning this matter, please call:
Rut	(Name of Person) at (330) 643-0204 (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, BDB Agent Co.
(Name of Registered Agent)
hereby resigns as Registered Agent for FMM Restaurant, Inc.
(Name of Corporation)
P9900032128
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
Ruch a. Moultel
(Signature of Resigning Agent)
If signing on behalf of an entity:
Ruth A. Martell
(Typed or Printed Name)
Assistant Secretary
(Capacity)

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314