900007,49 Requester's Name Address Phone # City/State/Zip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time Walk in ☐ Will wait Photocopy Certificate of Status Mail out **AMENDMENTS NEW FILINGS** Amendment ☐ Profit Resignation of R.A., Officer/Director Not for Profit ☐ Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION OTHER FILINGS □ Foreign Annual Report Limited Partnership Fictitious Name **1** Reinstatement Trademark Other **Examiner's Initials**

CR2E031(7/97)

OFFICER / DIRECTOR RESIGNATION

I, <u>GUSTAVO JARAMILLO</u>	, hereby resign	n as <u>PRES</u>	<u> SIDENT / </u>	<u>VICE</u>	<u>i</u>
		(Title			
PRESIDENT AND SECRETARY	of	\$7 PIZZA, IN	NC.	, a	
	(Name	of Corporation	on)		
corporation organized under the laws of the S	State of	FLORIDA	$_{-}$ and affi	m	
that the corporation has been notified in writt	en of the resig	nation.			
(Signature of resigning officer	/director)	-	TALLAHASSEE, FLORIC	01 JAN 16 AM 8: 36	

FILING FEE IS \$35.00

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P.O. Box 6327
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