## 783000150043

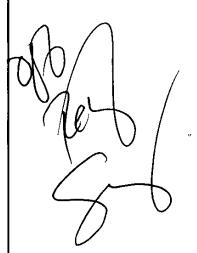
(R	equestor's Name)			
(Ad	ddress)			
(A	ddress)			
С	ity/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL		
(B	usiness Entity Name	e)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

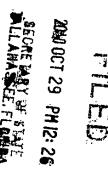




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11-2-10

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: VILAMA UNIS	SEX BEAUTY SALON, INC. (Name of Corporation)
DOCUMENT NUMBER:_	P03000150023
The enclosed Officer/Director	or Resignation for a Corporation and fee are submitted for filing
Please return all corresponde	ence concerning this matter to the following:
LIVANDIEU VILAMA	
(Name	of Person)
VILAMA UNISEX BEAUT	TY SALON, INC.
(Name of I	Firm/Company)
2325 NE 5th AVENUE	:
(A	ddress)
POMPANO BEACH, FL	33064
(City/State	and Zip Code)
For further information conc	erning this matter, please call:
LIVANDIEU VILAMA	at ( 754 ) 234-7119  (Area Code & Daytime Telephone Number)
(Name of Pers	son) (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 Clifton Building 2661 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

I. GERARD ORESTE	, hereby resign as VTD	
		(Title)
ofVILAMA UNISEX BEAUT	Y SALON, INC.  Name of Corporation)	
P03000150023 (Document Number, if known)	, a corporation organized under the law	vs of the State of
FLORIDA	·	
_ TzRe	Red Destation (Signature of resigning officer/director)	
	,	ALLAN PROPERTY OF
<u>:</u>	FILING FEE IS \$35.00	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Make checks payable to Florida Department of State and mail to: