P10000018362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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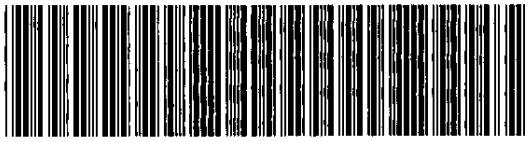

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@ 11/8/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VIP BARBER SHOP, INC
(Name of Corporation)

DOCUMENT NUMBER: P06000018362

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

Please return all correspondence concerning this matter to the following:

RUBIELA MEDINA
(Name of Person)

VIP BARBER SHOP, INC
(Name of Firm/Company)

5335 N MILITARY TRAIL STE 51
(Address)

WEST PALM BEACH FL, 33407
(City/State and Zip Code)

For further information concerning this matter, please call:

RITCHIE SANDOVAL at (954) 2408477
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

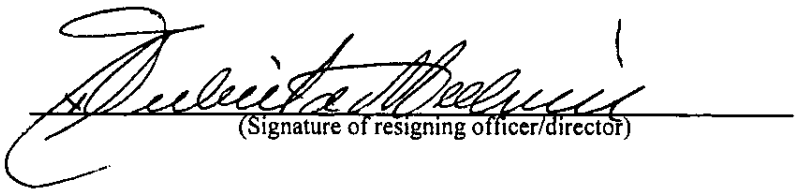
OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, RUBIELA MEDINA, hereby resign as PRESIDENT
(Title)

of VIP BARBER SHOP, INC
(Name of Corporation),

P06000018362
(Document Number, if known), a corporation organized under the laws of the State of

FLORIDA.



(Signature of resigning officer/director)

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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