

PO9000046980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900294882039

01/30/17--01006--004 **35.00

FILED

2017 JAN 30 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OD/RES

JAN 31 2017

ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Imagez Hair Gallery, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P09000046980

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

Please return all correspondence concerning this matter to the following:

Bob E. Parsons, Jr.

(Name of Person)

Imagez Hair Gallery, Inc.

(Name of Firm/Company)

1058 Sweet Tree Court

(Address)

Apopka, Florida 32712

(City/State and Zip Code)

For further information concerning this matter, please call:

Bob E. Parsons, Jr. at **407 948-0652**

(Name of Person)

(Area Code & Daytime Telephone Number)

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

Mailing Address:

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

Street Address:

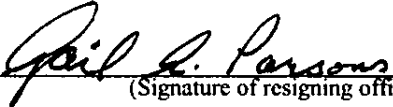
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Gail A. Parsons, hereby resign as President/Secretary/Director
(Title)

of Imagez Hair Gallery, Inc.
(Name of Corporation)

P09000046980, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 JAN 30 PM 3:05

FILED

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