557829

(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:	

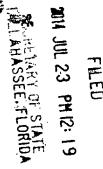
Office Use Only



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resignation & Officer

07/23/14--01014--006 **35.00



8/1/14

TRANSMITTAL LETTER

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation and fee are submitted for for the enclosed Officer/Director Resignation for a Corporation for a	— ling
Please return all correspondence concerning this matter to the following:	ling
ROBERT ELBA	
(Name of Person)	
Personalized Boutique, Iva- (Name of Firm/Company)	
2900 NW 12574 AVE #3-303 (Address)	
SUNRISE FL 33323 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Robert ELBA at (954) 801-2072 (Area Code & Daytime Telephone Number	er)

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

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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

2014 JUL 23 PM 12: 19

MANY ANN ELBA, hereby resign as PRESIDEN (Title)

PERSONALIZED BOUTIOUE, INC.

(Name of Corporation)

557829, a corporation organized under the laws of the State of (Document Number, if known)

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