F53729

(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



800117743638

02/12/08--01033--017 **35.00

FILED

08 FEB12 PM 4: 28

SEURETARY OF STATE
TALLAHASSEE, FLORIDA

opien Rugn Erin Murphy 2/15/08

COVER LETTER

Division of Corporations
SUBJECT: Nature's Way Exercise Club Inc (Name of Corporation)
DOCUMENT NUMBER: F53729
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Debra L. Leis (Name of Person)
Nature's Way Exercise Club, Inc. (Name of Firm/Company)
2710 5.45 1 (Address)
Ft. Pierce, F1. 34982 (City/State and Zip Code)
For further information concerning this matter, please call:
Mary E. Settle at (772) 446-4810 (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

TO: Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Debra L. Leis	, hereby resign as	Presi	dent Title)	
of Nature's W	lay Exercise of Corporation)	Club	Inc.	
F 53729 (Document Number, if known)	_, a corporation organized und	er the laws of th	he State of	
Florida	_•			
	d 1 1 ignature of resigning officer/director	r)	SECRETARY OF STATE TALLAHASSEE, FLORIDA	

·

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

FILING FEE IS \$35.00

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