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COVER LETTER

TO: Amendment Section Division of Corporations

| SUBJECT: Alan G. Ledo Salon, Inc. | | |
|---|--|--|
| (Name of Corporation) | | |
| DOCUMENT NUMBER: | | |
| The enclosed Officer/Director Resignation for | a Corporation and fee are submitted for filing. | |
| Please return all correspondence concerning the | his matter to the following: | |
| Mrs. Holly L. Shioleno | | |
| (Name of Person) | | |
| Alan G. Ledo Salon, Inc. | | |
| (Name of Firm/Company) | | |
| 732 South Village Circle | | |
| (Address) | | |
| Tampa, FL 33606 | | |
| (City/State and Zip Code) | | |
| For further information concerning this matter | , please call: | |
| Frederick T. Lowe, Esquire | at (813) 288-9525 (Area Code & Daytime Telephone Number) | |
| (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 Post Office Box 6327 Tallahassee, FL 32314

CR2E044(08/05)

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

COVER LETTER

Amendment Section TO: Division of Corporations

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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, Holly L. Shioleno , hereby resign as President and CEO (Title)

of Alan G. Ledo Salon, Inc. (Name of Corporation)

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

Florida

FILING FEE IS \$35.00

(Signature of resigning officer/director)

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

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