

PO10000019087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resign
Crim Murphy
12/12/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Slimmer U Wellness Center
(Name of Corporation)

DOCUMENT NUMBER: PO1000019087

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

Please return all correspondence concerning this matter to the following:

Monique Perkins

(Name of Person)

Slimmer U Wellness Center

(Name of Firm/Company)

5873 N. University Drive

(Address)

Tamarac, FL. 33321

(City/State and Zip Code)

For further information concerning this matter, please call:

Glenn Morris / Registered Agent

(Name of Person)

at (954) 722-4861

(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, Rita Gusmao, hereby resign as President / Director
(Title)

of Slimmer U Wellness Center, inc.
(Name of Corporation)

PO1000019087, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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

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