

PO1000051314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

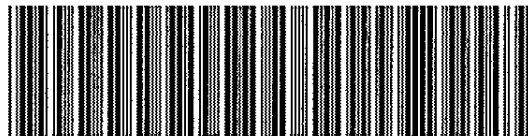
(Business Entity Name)

(Document Number)

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08/24/06--01014--019 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 24 PM 4:00

O/D Resign.
08/28/06
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Nail Max Corporation
(Name of Corporation)

DOCUMENT NUMBER: P01000051314

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Angela Landau
(Name of Person)

Nail Max Corporation
(Name of Firm/Company)

909 NE 27th Lane, Unit 1
(Address)

Cape Coral, FL 33909
(City/State and Zip Code)

For further information concerning this matter, please call:

Carol Stamm at (239) 573-7006
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ANGELA LANDAU, hereby resign as Director
(Title)

of Nail Max Corporation
(Name of Corporation)

P0100051314, 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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DIVISION OF CORPORATIONS
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