

Requester's Name	
Address	
City/State/Zip	Phone #

P010000067313

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

200004687032--3  
-11/19/01--01034--016  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- |                                   |                                       |  |
|-----------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Walk in  | <input type="checkbox"/> Pick up time | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait    | <input type="checkbox"/> Certificate of Status |
|                                   | <input type="checkbox"/> Photocopy    |  |

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
01 NOV 23 PM 1:41  
SECRETARY OF STATE  
HARRISBURG, PENNSYLVANIA

P010000067313  
200004687032  
11-23-01  
20

Examiner's Initials

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Tani Taltos

(Name of registered agent)

hereby resigns as Registered Agent for Transformations Tanning and Skin  
(Name of corporation)  
Care Inc.

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which  
this statement is filed.

Tani Taltos  
(Signature of resigning agent)

FILED  
01 NOV 23 PM 1:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If signing on behalf of an entity:

TANI TALLOS  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

### Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314