

P 02000055188

Requester's Name



Sherri Spaw  
27716 Breakers Dr.  
Wesley Chapel, FL 33543

C

Office Use Only

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

02 JUL 18 AM 9:04

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

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

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

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

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

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-07/18/02--01064--005  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

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

**AMENDMENTS**

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

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

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

Examiner's Initials

PS 7/26/02  
o/d les.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION**

I, Michelle Vidal, hereby resign as Board of Director member  
(Title)  
of Her Special Time Maternity Boutique, Inc.  
(Name of Corporation)  
a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.

Michelle Vidal

(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

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

CR2F044(9/98)