

PO 2000006039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE FLORIDA

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2/19/08
P.D.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Salon menage, INC
(Name of Corporation)

DOCUMENT NUMBER: P02000066639

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

Please return all correspondence concerning this matter to the following:

Tamara Devos
(Name of Person)

Salon menage, INC
(Name of Firm/Company)

3976 West 16 avenue
(Address)

Hialeah, Florida, 33012
(City/State and Zip Code)

For further information concerning this matter, please call:

Tamara Devos at (305) 825 9828
(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

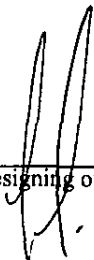
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Johanny Velazquez, hereby resign as President
(Title)

of Salon manage, INC.
(Name of Corporation)

P02000066639, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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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