

P03000028178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

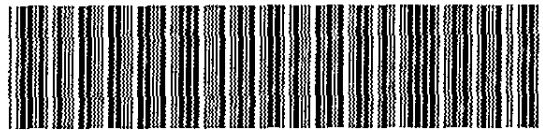
(Business Entity Name)

(Document Number)

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015 Resign

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10/1/03

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Hair Artistry, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P03000028178

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

Please return all correspondence concerning this matter to the following:

Valerie White  
(Name of Person)

Hair Artistry, Inc.  
(Name of Firm/Company)

3060 SR 674  
(Address)

Ruskin, FL 33570  
(City/State and Zip Code)

For further information concerning this matter, please call:

Valerie White at (813) 649-1100  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Lutisha M. Felizzola, hereby resign as President  
(Title)

of Hair Artistry, Inc.  
(Name of Corporation)

P03000028178, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Lutisha M. Felizzola  
(Signature of resigning officer/director)

FILED  
03 SEP 26 PM 12:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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