P84000079998

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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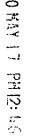
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SECRETARY OF STATE





COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Perfect Touch Services Inc	
SUBJECT: (Name of Corporation)	
DOCUMENT NUMBER: P04000079998	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted to	or filing.
Please return all correspondence concerning this matter to the following:	
Sarah Lichtenstein	
(Name of Person)	
Perfect Touch Services Inc	
(Name of Firm/Company)	
2629 Waverly Barn Road #131-5	
(Address)	
Davenport, FL 33897	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Sarah Lichtenstein at (407) 947-1132 (Name of Person) (Area Code & Daytime Telephone N	
(Name of Person) (Area Code & Daytime Telephone N	lumber)
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

Raul Garcia	, hereby resign as VP
",	(Title)
of Perfect Touch Services Inc	
(Na	me of Corporation)
P0400079998 (Document Number, if known)	, a corporation organized under the laws of the State of
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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