P04000085870

(Re	questor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800109440338

09/17/07--01044--002 **35.00

off Ri lesign

OT SEP 17 PHI2: 02 BECRETARY OF STATE

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: C'EST SI BON BEAUTY SUPPLIES, SALON INC
(Name of Corporation)
DOCUMENT NUMBER: P04000085870
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
MERY LOPEZ
(Name of Person)
LAW OFFICES OF MERY LOPEZ, P.A.
(Name of Firm/Company)
150 NW 168 STREET, SUITE 214
(Address)
NORTH MIAMI BEACH, FL 33169
(City/State and Zip Code)
For further information concerning this matter, please call:
MERY LOPEZ (Name of Person) at (305) 882-2739 (Area Code & Daytime Telephone Number)
(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

	DIRECTOR RESIGNATION A CORPORATION A CORPORATION
ROSARIO PEREZ	, hereby resign as DIRECTOR (Title)
C'EST SI BON BEAUTY SUPP	LIES, SALON INC
D0/000085870	, a corporation organized under the laws of the State of
FLORIDA *	
	gnature 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