PO4000 158448

(Re	questor's Name)				
(Ad	dress)				
	dress)				
(1,0	u,				
(City/State/Zip/Phone #)					
PICK-UP	WAIT ,	MAIL			
(Business Entity Name)					
!					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



600104452496

resignation of oppicer

06/19/07--01038--007 **35.00

2007 JUN 19 AN II: 46

6/32/01

COVER LETTER

TO:	Amendment Section Division of Corporations					
SUBJ	JECT: FLAWLESS MIAMI CORP.					
~~~	(Name of Corporation)					
DOC	DOCUMENT NUMBER: P04000158668					
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing					
Please	e return all correspondence concerning this matter to the following:					
HAY	DAR O AYCAN					
	(Name of Person)					
	(Name of Firm/Company)					
691	5 BAY DRIVE APT #8					
	(Address)					
MIA	MI BEACH ,FL 33141					
	(City/State and Zip Code)					
For fu	urther information concerning this matter, please call:					
HAY	DAR O AYCAN at (305) 924-6699  (Name of Person) (Area Code & Daytime Telephone Number)					
	(Name of Person) (Area Code & Daytime Telephone Number)					
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.					
Amer Divisi Clifto 2661	Mailing Address:  Amendment Section  ion of Corporations  in Building  Executive Center Circle  Division of Corporations  Post Office Box 6327  Tallahassee, FL 32314					

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

2007 JUN 19 AM 11: 46

TALLAHASSEE. FLORIDA

CTOR

I, HAYDAR O AYCAN	, hereby resign as	DIRECTOR	ritle)
of FLAWLESS MIAMI CORP.		(1	inc)
01	of Corporation)		·
P04000158668	_, a corporation organized un	der the laws of th	e State of
(Document Number, if known)			
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