

P05000072565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

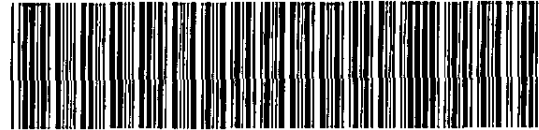
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DIVISION OF CORPORATIONS
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OLD Res.
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MARI REALCE BEAUTY SALON, INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000072565

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

MARTIRES MARTE

(Name of Person)

MARI REALCE BEAUTY SALON, INC.

(Name of Firm/Company)

9785 S ORANGE BLOSSOM TRAIL SUITE D

(Address)

ORLANDO, FL 32837

(City/State and Zip Code)

For further information concerning this matter, please call:

MARTIRES MARTE at (407) 582-0609
(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, JOSELYN RODRIGUEZ, hereby resign as VICE-PRESIDENT
(Title)

of MARI REALCE BEAUTY SALON INC
(Name of Corporation)

P05000072565, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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DIVISION OF CORPORATIONS
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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