

POSOUU O 83052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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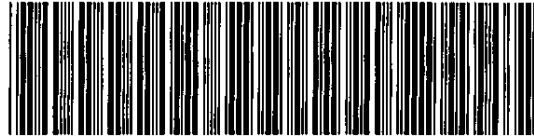
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lancaster Hair Salon Inc.
(Name of Corporation)

DOCUMENT NUMBER: P 05000083052

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

Please return all correspondence concerning this matter to the following:

Cecilia M. Gomez

(Name of Person)

Lancaster Hair Salon Inc.

(Name of Firm/Company)

855 Sky Lake Cr , Apt D

(Address)

Orlando Florida 32809

(City/State and Zip Code)

For further information concerning this matter, please call:

Mario Ruiz-Balsa

(Name of Person)

at (407) 859 9919

(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**

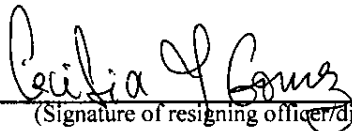
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Cecilia M. Gomez, hereby resign as Vice-President
(Title)

of Lancaster Hair Salon Inc.
(Name of Corporation)

P 05000083052
(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