

POS 000098225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resign
Erin Murphy
1/17/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mop City Hair Madness Corp
(Name of Corporation)

DOCUMENT NUMBER: POS000098225

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

Please return all correspondence concerning this matter to the following:

Dorothy L. Muller
(Name of Person)

Mop City Hair Madness Corp
(Name of Firm/Company)

4129 Moncure Rd
(Address)

JAX FL 32209
(City/State and Zip Code)

For further information concerning this matter, please call:

Dorothy L. Muller at (904) 3569164 ^{Home} 984 5028068 cell
(Name of Person) (Area Code & Daytime Telephone Number)
855 W. 31st Jacksonville FL 32209

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, Dorothy L Miller, hereby resign as President
(Title)

of MOPCITY Hair Madness Corp
(Name of Corporation)

905000298225, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Dorothy L Miller
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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