P05000126344

•		
(Re	questor's Name)	
•		
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	sin ess Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer	
Opeoidi mandonona to	ining Ciriocs.	

Office Use Only



700104856327

07/02/07--01025--008 **35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

.

C. Coulliette JUL 0 5 2007

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BODY 2000 MLI, INC (Name of Corporation) DOCUMENT NUMBER: PO5000 126 344
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
(Name of Person) BODY 2000 MLT INC (Name of Firm/Company) 1448 ALTON ROAD (Address) Minmi DEACH FL33139 (City/State and Zip Code)
For further information concerning this matter, please call: Maria Zivanovic (Name of Person) at (305) 531 6113 (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, LINA LERENTRADAT, hereby resign as President
of Body 2000 MLI, INC. (Name of Corporation)
P0500126344, a corporation organized under the laws of the State of (Document Number, if known)
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

FILED

07 JUL -2 PM 1: 34

SECRETARY OF STATE
TALLAHASSFF F OBBE