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officer Presignation

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Amendment Section Division of Corporations

TO:

SUBJECT: TAL BEAUTY INC (Name of Corporation)
DOCUMENT NUMBER: P06000 Ol6533
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
TRAM L. REGENHOLD (Name of Person)
TAL BEAUTY, INC. (Name of Firm/Company)
5412 WATERVISTA DR (Address)
ORIANDO FL 32821 (City/State and Zip Code)
For further information concerning this matter, please call:
TRAM L. REGENHOLD at (407) 354-0673 (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,	TRAM L. REGENHOLD hereby resign as VICE	Dreside (Title)	nt
of_	TAL BEAUTY, INC. (Name of Corporation)		_,
	POGOOO OLG533, a corporation organized under the laws of (Document Number, if known)	the State of	
	FLORIDA.		
	(Signature of resigning officer/director)	2008 MAR 20 SECRETARY TALLAHASSEI	CT-VIE TIPE
		PH 3: 4 YOF STATI	

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